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(54) Title: METHODS AND SYSTEMS FOR IDENTIFYING NATURALLY OCCURRING ANTISENSE TRANSCRIPTS AND METHODS, KITS AND ARRAYS UTILIZING SAME

(57) Abstract: A method of identifying putative naturally occurring antisense transcripts is provided. The method is effected by (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; and (b) identifying expressed polynucleotide sequences from the second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of the first database, thereby identifying putative naturally occurring antisense transcripts.

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# METHODS AND SYSTEMS FOR IDENTIFYING NATURALLY OCCURRING ANTISENSE TRANSCRIPTS AND METHODS, KITS AND ARRAYS UTILIZING SAME

### 5 BACKGROUND OF THE INVENTION

The present invention relates to the field of naturally occurring antisense transcripts. More particularly, the present invention relates to methods of identifying naturally occurring antisense transcripts, databases storing polynucleotide sequences encoding identified naturally occurring antisense transcripts, oligonucleotides derived therefrom and methods and kits utilizing same.

### FIELD OF THE INVENTION

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Naturally occurring antisense RNA transcripts are endogenous transcripts, which exhibit complementarity to sense transcripts of which are typically of a known function. It has been established that these endogenous antisense transcripts play an important role in regulating prokaryotic gene expression and are increasingly implicated as involved in eukaryotic gene regulation.

Cis-encoded antisense transcripts are encoded by the same locus as the sense transcripts and are transcribed from strand of DNA opposite to that encoding the sense transcript; as such, cis encoded antisense transcripts are typically completely complementary with a portion of the sense transcript.

Trans-encoded antisense transcripts are, by contrast, transcripts, which are encoded on a different locus and as such, may display only partial complementarity with a sense transcript.

Natural antisense RNAs were first described in prokaryote studies, which suggested that such transcripts play a role in gene expression regulation. Prokaryotic antisense transcripts are widely distributed and are involved in the control of numerous biological functions including transposition, plasmid replication, incompatibility and conjugation. In prokaryotes, antisense transcripts are typically involved in down-regulation of sense transcript expression, although involvement in positive regulation was also suggested [reviewed in Wagner EG. and Simons RW. (1994) Annu. Rev. Microbiol. 48:713-742].

The first example of transcription from both strands of eukaryotic DNA was illustrated in human and mouse mitochondrial genes [Anderson S. et al. (1981) Nature

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290:457-465 and Bibb MJ. et al. (1981) Cell 26:167-180]. Since then, examples of antisense transcripts have been documented in a variety of organisms including viruses, slime molds, insects, amphibians and birds as well as mammals. It is thought that these antisense RNAs are involved in extremely diverse biological functions, such as, hormonal response, control of proliferation, development, structure, viral replication and others. Some antisense RNAs are conserved between species suggesting that these antisense RNAs are not fortuitous but rather play an important role in gene expression regulation [Kidny MS. et al. (1987) Mol. Cell Biol. 7:2857-2862, Nepveu A. and Marcu KB. (1986) EMBO J. 5:2859-2865 and Bentley DL. et al. (1986) Nature 321:702-706].

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Antisense transcripts can also encode proteins. Examples for protein encoding antisense transcripts include *rev-ErbAx* [Lazar MA. (1989) Mol. Cell. Biol. 9:1128-1136], *gfg* [Kimelman D. et al. (1989) Cell 59:687-696] and *n-cym* [Armstrong BC. et al. (1992) Cell Growth Differ. 3:385-390]. Such antisense transcripts typically include a distinct open reading frame (ORF) and polyadenylation signal for cytoplasm transportation.

However, it is believed that most antisense transcripts play a role in gene expression regulation. This assumption is mostly based on spatial and/or temporal distributions of sense and antisense transcripts. Indeed, tissue distribution studies suggest that high levels of sense and antisense transcripts rarely occur together, as was exemplified for the *dopa decarboxylase* transcripts in *Drosophila* [Spencer CA. et al. (1986) Nature 322:279-281]. Additional studies demonstrated that changes in sense gene expression correlate with presence of antisense RNA. Furthermore, an inverse relationship between levels of accumulation of sense and antisense transcripts such as has been reported for  $\alpha l$  (I) collagen transcripts in chondrocytes under chemotherapy has also been reported [Farrell CM. And Lukens LN. (1995) J. Biol. Chem. 270:3400-3408]. However, it will be appreciated that mutual expression of sense and their corresponding antisense transcripts is also reported and may involve a different mechanism of regulation.

Evidence for involvement of antisense-mediated gene regulation in the development of pathologies has also been presented. For example, endogenous antisense transcripts may be involved in regulation of the expression levels of the

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tumor suppressor gene WT1 observed in Wilm's tumors [Eccles MR. et al. (1994) Oncogene 9:2059-2063].

Natural antisense regulation of gene expression can be effected via one of several mechanisms.

#### Nuclear regulation

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Nuclear regulation can be effected via several gene-processing pathways [reviewed in Vanhee-Brosollet C. and Vaquero C. (1998) Gene 211:1-9]

dsRNA-mediated DNA methylation - complementation between endogenous sense transcripts and antisense transcripts of sequences as short as 30 bp may initiate DNA-methylation, a well-established phenomenon in a number of organisms [Sharp A. (2001) Genes Dev. 15:485-490]. Methylation can be directed to different portions of an encoding region of the gene or to the promoter region. DNA methylation results in complete suppression of transcription probably by recruitment of histone deacetylases.

Transcriptional regulation – in which case antisense transcription hampers sense transcription. Such interference may involve the collision of two transcription complexes. Alternatively, interference may result from competition on an essential rate limiting transcription factor resulting in premature termination or in reduced elongation of transcription, the transcripts with the highest rate of transcription being predominant.

**Post-transcriptional nuclear regulation** – involves antisense intervention of either maturation and/or transport of the sense transcript to the cytoplasm. Alternatively, antisense transcripts displaying similar structural features to sense transcripts can bind proteins expected to interact with their sense counterparts, thereby depriving sense messengers from proteins necessary for their function.

### Cytoplasmic regulation

Messenger stability —double stranded RNA may affect messenger stability via "RNA interference", which involves short segments of double stranded RNA (dsRNA) homologous in sequence to the silenced gene. These undersized segments, which are generated by a ribonuclease III cleavage of longer dsRNAs, can guide a single stranded target mRNA, via base pairing, to a multisubunit complex which participates in the degradation of the target mRNA. Alternatively, messenger stability

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may be affected by RNA degradation, which is mediated by double stranded RNA-directed Rnases.

Translation – masking the 3' untranslated region (UTR) and the polyA tail of the sense transcript is believed to modulate translation efficiency probably via direct or indirect interaction between 3'-proximal elements and upstream sequences or structures [reviewed in Jackson RJ. And Standart N. (1990) Cell 62:15-24].

Realizing the fundamental role antisense transcripts play in regulating sense transcription, stability and function, resulted in a number of attempts to systematically identify natural antisense transcripts. Accordingly, differential approaches were taken for exploring non-coding antisense RNA transcripts and antisense transcripts including an ORF. Although the latter carries ORF consensus parameters, uncovering antisense data from general sequence databases has proven to be a complicated task, as many of these sequences include an evolutionary conserved secondary structure rather than a conserved primary sequence, therefore primary sequence alignment methods are often not very effective. Indeed, only a few attempts have been tried to date with only limited success.

Maziel's group [Chen JH. et al. (1990) Comput. Applic. Biosci. 6:7-18 and Le SY. et al (1990) Human Genome Initiative and DNA Recombination Vol. 1:127-136] has experimented with methods that look for regions of a genome with predicted RNA structures that are significantly more stable thermodynamically than random sequence of the same base composition. Although this approach detected a few highly structured non-coding RNAs, as well as few *cis*-regulatory structures, it appears that it is of limited use for large-scale applications.

Another approach examined coding dense genomes, having suspicious-looking large regions with little or no coding potential termed "gray holes" [Olivas WM. et al. (1997) Nucleic acids Res. 25:4619-4625]. Fifty nine gray holes were tested in the yeast genome. Northern analysis detected distinct transcripts from 15 of the gray holes. Only one transcript appeared to be a non-coding antisense transcript illustrating the low efficiency of this method.

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The background art does not teach or suggest methods of systematically and efficiently identifying novel naturally occurring antisense molecules and methods of generating and using same for detecting, quantifying and/or regulating sense transcripts, such as for example, mRNA transcripts associated with a pathological state.

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According to one aspect of the present invention there is provided a method of identifying putative naturally occurring antisense transcripts, the method comprising:

(a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; and (b) identifying expressed polynucleotide sequences from the second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of the first database according to at least one sequence criterion, thereby identifying putative naturally occurring antisense transcripts, wherein the at least one sequence criterion includes one or more of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

According to another aspect of the present invention there is provided a kit for quantifying at least one mRNA transcript of interest, the kit comprising at least one oligonucleotide being designed and configured so as to be complementary to a sequence region of the mRNA transcript of interest, the sequence region not being complementary with a naturally occurring antisense transcript.

According to yet another aspect of the present invention there is provided a kit for quantifying at least one mRNA transcript of interest, the kit comprising at least one pair of oligonucleotides including a first oligonucleotide capable of binding the at least one mRNA transcript of interest and a second oligonucleotide being capable of binding a naturally occurring antisense transcript complementary to the mRNA of interest.

According to still another aspect of the present invention there is provided a method of designing artificial antisense transcripts, the method comprising: (a) providing a database of naturally occurring antisense transcripts; (b) extracting from the database criteria governing structure and/or function of the naturally occurring antisense transcripts, wherein the criteria governing structure and/or function of the

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naturally occurring antisense transcripts include one or more of antisense length, complementarity length, complementarity position, intron molecules, alternative splicing sites, tissue specificity, pathological abundance, chromosomal mapping, open reading frames, promoters, hairpin structures, helix structures, stem and loops, pseudoknots and tertiary interactions, guanidine and/or cytosine content, guanidine tandems, adenosine content, thermodynamic criteria, RNA duplex melting point, RNA modifications, protein-binding motifs, palindromic sequence and predicted single stranded and double stranded regions.; and (c) designing the artificial antisense transcripts according to the criteria.

According to further features in preferred embodiments of the invention described below the criteria governing structure and/or function of the naturally occurring antisense transcripts are selected from the group consisting of antisense length, complementarity length, complementarity position, intron molecules, alternative splicing sites, tissue specificity, pathological abundance, chromosomal mapping, open reading frames, promoters, hairpin structures, helix structures, stem and loops, pseudoknots and tertiary interactions, guanidine and/or cytosine content, guanidine tandems, adenosine content, thermodynamic criteria, RNA duplex melting point, RNA modifications, protein-binding motifs, palindromic sequence and predicted single stranded and double stranded regions.

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According to an additional aspect of the present invention there is provided a computer readable storage medium comprising a database including a plurality of sequences, wherein each sequence is of a naturally occurring antisense transcript.

According to still further features in the described preferred embodiments the database further includes information pertaining to each sequence of the naturally occurring antisense transcripts, the information is selected from the group consisting of related sense gene, antisense length, complementarity length, complementarity position, intron molecules, alternative splicing sites, tissue specificity, pathological abundance, chromosomal mapping, open reading frames, promoters, hairpin structures, helix structures, stem and loops, pseudoknots and tertiary interactions, guanidine and/or cytosine content, guanidine tandems, adenosine content, thermodynamic criteria, RNA duplex melting point, RNA modifications, protein-

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binding motifs, palindromic sequence and predicted single stranded and double stranded regions.

According to still further features in the described preferred embodiments the database further includes information pertaining to generation of the database and potential uses of the database.

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According to yet an additional aspect of the present invention there is provided a method of generating a database of naturally occurring antisense transcripts, the method comprising: (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; (b) identifying expressed polynucleotide sequences from the second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of the first database so as to identify putative naturally occurring antisense transcripts; and (c) storing sequence information of the identified naturally occurring antisense transcripts, thereby generating the database of the naturally occurring antisense transcripts.

According to still an additional aspect of the present invention there is provided a system for generating a database of a plurality of putative naturally occurring antisense transcripts, the system comprising a processing unit, the processing unit executing a software application configured for: (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; and (b) identifying expressed polynucleotide sequences from the second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of the first database according to at least one sequence criterion, wherein the at least one sequence criterion includes at least one of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

According to a further aspect of the present invention there is provided a method of identifying putative naturally occurring antisense transcripts, the method comprising screening a database of expressed polynucleotides sequences according to at least one sequence criterion, the at least one sequence criterion being selected to identify putative naturally occurring antisense transcripts.

According to yet a further aspect of the present invention there is provided a method of quantifying at least one mRNA of interest in a biological sample, the method comprising: (a) contacting the biological sample with at least one oligonucleotide capable of binding with the at least one mRNA of interest, wherein the at least one oligonucleotide is designed and configured so as to be complementary to a sequence region of the mRNA transcript of interest, the sequence region not being complementary with a naturally occurring antisense transcript; and (b) detecting a level of binding between the at least one mRNA of interest and the at least one oligonucleotide to thereby quantify the at least one mRNA of interest in the biological sample.

According to still a further aspect of the present invention there is provided a method of quantifying the expression potential of at least one mRNA of interest in a biological sample, the method comprising: (a) contacting the biological sample with at least one pair of oligonucleotides including a first oligonucleotide capable of binding the at least one mRNA of interest and a second oligonucleotide being capable of binding a naturally occurring antisense transcript complementary to the mRNA of interest; and (b) detecting a level of binding between the at least one mRNA of interest and the first oligonucleotide and a level of binding between the naturally occurring antisense transcript complementary to the mRNA of interest and the second oligonucleotide to thereby quantify the expression potential of the at least one mRNA of interest in the biological sample.

According to other aspect of the present invention there is provided a method of quantifying at least one naturally occurring antisense transcript of interest in a biological sample, the method comprising: (a) contacting the biological sample with at least one oligonucleotide capable of binding with the at least one naturally occurring antisense transcript of interest, wherein the at least one oligonucleotide is designed and configured so as to be complementary to a sequence region of the naturally occurring antisense transcript of interest, the sequence region not being complementary with a naturally occurring mRNA transcript; and (b) detecting a level of binding between the at least one naturally occurring antisense transcript of interest and the at least one oligonucleotide to thereby quantify the at least one naturally occurring antisense transcript of interest in the biological sample.

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According to still further features in the described preferred embodiments the first database includes sequences of a type selected from the group consisting of genomic sequences, expressed sequence tags, contigs, intron sequences, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.

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According to still further features in the described preferred embodiments the second database includes sequences of a type selected from the group consisting of expressed sequence tags, contigs, complementary DNA (cDNA) sequences, premessenger RNA (mRNA) sequences and mRNA sequences.

According to still further features in the described preferred embodiments an average sequence length of the expressed polynucleotide sequences of the second database is selected from a range of 0.02 to 0.8 Kb.

According to still further features in the described preferred embodiments the second database is generated by: (i) providing a library of expressed polynucleotides; (ii) obtaining sequence information of the expressed polynucleotides; (iii) computationally selecting at least a portion of the expressed polynucleotides according to at least one sequence criterion; and (iv) storing the sequence information of the at least a portion of the expressed polynucleotides thereby generating the second database.

According to still further features in the described preferred embodiments the at least one sequence criterion for computationally selecting the at least a portion of the expressed polynucleotide is selected from the group consisting of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

According to still further features in the described preferred embodiments the step of testing the putative naturally occurring antisense transcripts for an ability to form the duplex with the at least one sense oriented polynucleotide sequence under physiological conditions.

According to still further features in the described preferred embodiments the method further comprising the step of computationally testing the putative naturally occurring antisense transcripts according to at least one criterion selected from the

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group consisting of sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

According to still further features in the described preferred embodiments a length of the at least one oligonucleotide is selected from a range of 15-200 nucleotides.

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According to still further features in the described preferred embodiments the at least one oligonucleotide is a single stranded oligonucleotide.

According to still further features in the described preferred embodiments the at least one oligonucleotide is a double stranded oligonucleotide.

According to still further features in the described preferred embodiments a guanidine and cytosine content of the at least one oligonucleotide is at least 25 %.

According to still further features in the described preferred embodiments the at least one oligonucleotide is labeled.

According to still further features in the described preferred embodiments the at least one oligonucleotide is attached to a solid substrate.

According to still further features in the described preferred embodiments the solid substrate is configured as a microarray and whereas the at least one oligonucleotide includes a plurality of oligonucleotides each attached to the microarray in a regio-specific manner.

According to still further features in the described preferred embodiments a length of each of the first and second oligonucleotides is selected from a range of 15-200 nucleotides.

According to still further features in the described preferred embodiments the first and second oligonucleotides are single stranded oligonucleotides.

According to still further features in the described preferred embodiments the first and second oligonucleotides are double stranded oligonucleotide.

According to still further features in the described preferred embodiments a guanidine and cytosine content of each of the first and second oligonucleotides is at least 25 %.

According to still further features in the described preferred embodiments the first and second oligonucleotides are labeled.

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According to still further features in the described preferred embodiments the first and second oligonucleotides are attached to a solid substrate.

According to still further features in the described preferred embodiments the solid substrate is configured as a microarray and whereas each of the first and second oligonucleotides includes a plurality of oligonucleotides each attached to the microarray in a regio-specific manner.

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According to yet other aspect of the present invention there is provided a method of identifying a novel drug target, the method comprising: (a) determining expression level of at least one naturally occurring antisense transcript of interest in cells characterized by an abnormal phenotype; and (b) comparing the expression level of the at least one naturally occurring antisense transcript of interest in the cells characterized by an abnormal phenotype to an expression level of the at least one naturally occurring antisense transcript of interest in cells characterized by a normal phenotype, to thereby identify the novel drug target.

According to still further features in the described preferred embodiments the abnormal phenotype of the cells is selected from the group consisting of biochemical phenotype, morphological phenotype and nutritional phenotype.

According to still further features in the described preferred embodiments determining expression level of at least one naturally occurring antisense transcript of interest is effected by at least one oligonucleotide designed and configured so as to be complementary to a sequence region of the at least one naturally occurring antisense transcript of interest, the sequence region not being complementary with a naturally occurring mRNA transcript.

According to still other aspect of the present invention there is provided a method of treating or preventing a disease, condition or syndrome associated with an upregulation of a naturally occurring antisense transcript complementary to a naturally occurring mRNA transcript, the method comprising administering a therapeutically effective amount of an agent for regulating expression of the naturally occurring antisense transcript.

According to still further features in the described preferred embodiments the agent for regulating expression of the naturally occurring antisense transcript is at

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least one oligonucleotide designed and configured so as to hybridize to a sequence region of the at least one naturally occurring antisense transcript.

According to still further features in the described preferred embodiments the at least one oligonucleotide is a ribozyme.

According to still further features in the described preferred embodiments the at least one oligonucleotide is a sense transcript.

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According to a supplementary aspect of the present invention there is provided a method of diagnosing a disease, condition or syndrome associated with a substandard expression ratio of an mRNA of interest over a naturally occurring antisense transcript complementary to the mRNA of interest, the method comprising:

(a) quantifying expression level of the mRNA of interest and the naturally occurring antisense transcript complementary to the mRNA of interest; (b) calculating the expression ratio of the mRNA of interest over the naturally occurring antisense transcript complementary to the mRNA of interest, thereby diagnosing the disease, condition or syndrome.

According to still a supplementary aspect of the present invention there is provided A computer readable storage medium comprising data stored in a retrievable manner, said data including sequence information of co-regulated human polynucleotide sequences as set forth in files seqs\_125 and/or seqs\_133 of enclosed CD-1, polypeptide sequences encoded by the polynucleotide sequences as set forth in the file pep\_seqs\_133 of enclosed CD-ROM 3 and sequence annotations as set forth in the file annotations\_133 of enclosed CD-ROM 3.

According to still a supplementary aspect of the present invention there is provided a method of modulating an activity or expression of a gene product, the method comprising upregulating or down regulating expression or activity of a naturally occurring antisense transcript of the gene product, thereby modulating the activity or expression of the gene product.

According to still further features in the described preferred embodiments the method further comprising upregulating or down regulating expression or activity of the gene product.

According to still a supplementary aspect of the present invention there is provided an isolated polynucleotide comprising any of the nucleic acid sequences set

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forth in the file seqs\_125 or seqs\_133 of the enclosed CD-ROM1 of the enclosed CD-ROM1.

According to a supplementary aspect of the present invention there is provided an isolated polypeptide comprising any of the amino acid sequences set forth in the pep\_seqs\_133 of enclosed CD-ROM-3.

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According to still a supplementary aspect of the present invention there is provided a method of enhancing a therapeutic efficacy of a therapeutic agent, the method comprising providing to a subject in need thereof a naturally occurring antisense transcript of a gene encoding an expression product targeted by the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent, thereby enhancing the therapeutic efficacy of the therapeutic agent.

According to still a supplementary aspect of the present invention there is provided a method of enhancing a therapeutic efficacy of a therapeutic agent, the method comprising providing to a subject in need thereof a naturally occurring antisense transcript of a gene encoding an expression product capable of inhibiting therapeutic activity of the therapeutic agent, prior to, concomitant with, or following provision of the therapeutic agent thereby enhancing the therapeutic efficacy of the therapeutic agent.

According to still a supplementary aspect of the present invention there is provided a method of enhancing a therapeutic efficacy of a therapeutic agent, the method comprising providing to a subject in need thereof a polynucleotide complementary to a naturally occurring antisense transcript of a gene encoding an expression product capable of upregulating activity or expression of the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent, thereby enhancing the therapeutic efficacy of the therapeutic agent.

The present invention successfully addresses the shortcomings of the presently known configurations by providing a novel approach for identifying naturally occurring antisense transcripts, methods of designing artificial antisense transcripts according to information derived therefrom, methods and kits using naturally occurring and synthetic antisense transcripts, and by providing the naturally occurring and synthetic antisense transcripts thereof.

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Unless otherwise defined, all technical and scientific terms used herein have the same meaning as commonly understood by one of ordinary skill in the art to which this invention belongs. Although methods and materials similar or equivalent to those described herein can be used in the practice or testing of the present invention, suitable methods and materials are described below. In case of conflict, the patent specification, including definitions, will control. In addition, the materials, methods, and examples are illustrative only and not intended to be limiting.

### BRIEF DESCRIPTION OF THE DRAWINGS

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The invention is herein described, by way of example only, with reference to the accompanying drawings. With specific reference now to the drawings in detail, it is stressed that the particulars shown are by way of example and for purposes of illustrative discussion of the preferred embodiments of the present invention only, and are presented in the cause of providing what is believed to be the most useful and readily understood description of the principles and conceptual aspects of the invention. In this regard, no attempt is made to show structural details of the invention in more detail than is necessary for a fundamental understanding of the invention, the description taken with the drawings making apparent to those skilled in the art how the several forms of the invention may be embodied in practice.

In the drawings:

FIG. 1 illustrates EST alignment along genomic DNA, generated according to the teachings of the present invention. Alignment results identify two strand groups of transcripts i.e., sense transcripts and antisense transcripts with an indicated sequence overlap.

FIG. 2 is a black box diagram illustrating a system designed and configured for generating a database of naturally occurring antisense sequences generated according to the teachings of the present invention.

FIG. 3 is a black box diagram illustrating a remote configuration of the system described in Figure 2.

FIGs. 4a-k are sequence alignments of overlapping regions of selected naturally occurring antisense and sense sequence pairs identified according to the teachings of the present invention.

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FIGs. 5a-g are sequence alignments of overlapping regions of selected naturally occurring antisense and sense sequence pairs identified according to the teachings of the present invention.

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FIG. 6 schematically illustrates two transcription products of 53BP1 gene (red and green) and their corresponding partial complementary antisense transcripts of the 76p gene (blue). Numbers in parenthesis indicate length of sequence complementation. Schematic location of strand-specific RNA probes used for northern blotting of sense (53BP1, Riboprobe#1) and antisense (76p, Riboprobe#2) transcripts is shown.

FIG. 7 is an autoradiogram of a northern blot analysis depicting cellular distribution and expression levels of 53BP1 transcripts. Arrows on the right indicate the molecular weight of the identified 53BP1 transcripts relative to the migration of 28S and 18S ribosomal RNA subunits. Numbers on the left denote the size of molecular weight markers in Kb.

FIG. 8 is an autoradiogram of a northern blot analysis depicting cellular distribution and expression levels of 76p transcripts. Arrows on the right indicate the molecular weight of the identified 76p transcripts relative to the migration of 28S and 18S ribosomal RNA subunits. Numbers on the left denote the size of molecular weight markers in Kb.

FIG. 9 is an autoradiogram of a northern blot analysis depicting tissue distribution and expression levels of 76p transcripts. Arrows on the right indicate the molecular weight of the identified 76p transcripts. Numbers on the left denote the migration of molecular weight marker in Kb.

FIG. 10 illustrates the genomic organization of the 53BP1 gene and 76p gene, as elucidated from the RT-PCR analysis presented in the Examples section hereinbelow. Black arrows indicate the location of the primers used for RT-PCR analysis. Asterisks denote stop codons.

FIG. 11 schematically illustrates two transcription products of CIDE-B gene and their corresponding partial complementary antisense transcript of the BLTR2 gene. Schematic location of the strand-specific 430 nucleotide RNA probe used for northern analysis of sense (CIDE-B) and antisense (BLTR2) transcripts is shown. Dashed rectangles indicate the predicted coding sequence of the transcripts.

molecular weight markers in Kb.

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FIG. 12 is an autoradiogram of a northern blot analysis depicting cellular distribution and expression levels of BLTR2 transcripts. Arrows on the right indicate the molecular weight of the identified BLTR2 transcripts relative to the migration of 28S and 18S ribosomal RNA subunits. Numbers on the left denote the size of

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FIG. 13 shows autoradiogram of a northern blot analysis depicting cellular distribution and expression levels of CIDE-B transcripts. Arrows on the right indicate the molecular weight of the identified CIDE-B transcripts relatively to the migration of 28S and 18S ribosomal RNA subunits. Numbers on the left denote the migration size of molecular weight markers in Kb.

FIG. 14 schematically illustrates a transcription product of APAF-1 gene and its corresponding partial complementary antisense transcripts of the EB-1 gene. Schematic location of the strand-specific 366 nucleotide RNA probe used for northern analysis of sense (APAF-1) and antisense (EB-1) transcripts is shown. Asterisks indicate the predicted coding sequence borders of the transcripts.

FIGs. 15a-b are autoradiograms of northern blot analyses depicting cellular distribution and expression levels of EB-1 (Figure 15a) and APAF-1 transcripts (Figure 15b). Numbers on the left denote the size of molecular weight marker in Kb.

FIG. 16 schematically illustrates a transcription product of the MINK-2 gene and its corresponding partial complementary antisense transcript of the AchR- $\epsilon$  gene. Schematic location of the strand-specific 280 nucleotide RNA probe used for northern analysis of sense (Mink-2) and antisense (AchR- $\epsilon$ ) transcripts is shown.

FIGs. 17a-b are autoradiograms of northern blot analyses depicting cellular distribution and expression levels of AchR- $\epsilon$  antisense transcripts (Figure 17a) and the sense complementary transcript of Mink-2 (Figure 17b). Arrows on the right denote the migration of molecular weight markers in Kb.

FIG. 18 schematically illustrates a transcription product of Cyclin-E2 gene and its corresponding partial complementary antisense transcript. Schematic location of strand-specific RNA probes used for northern blotting of sense (Riboprobe#1) and antisense (Riboprobe#2) transcripts is shown.

FIGs. 19a-b are autoradiograms of northern blot analyses depicting cellular distribution and expression levels of Cyclin E2 antisense transcript (Figure 19a) and

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the sense complementary transcript (Figure 19b). Arrows on the left denote the migration of molecular weight markers in Kb.

FIG. 20 illustrates results from RT-PCR analysis of the expression patterns of CIDE-B transcript and its complementary naturally occurring antisense transcript following concentration dependent induction of apoptosis. Lanes: (1) 50  $\mu$ M etoposide; (2) 100  $\mu$ M etoposide; (3) 250  $\mu$ M etoposide; (4) 500  $\mu$ M etoposide; (5) 10 nM staurosporine; (6) 100 nM staurosporine; (7) 250 nM staurosporine; (8) 1000 nM staurosporine; (9) untreated cells (UT).

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FIGs. 21a-c are results of RT-PCR analyses depicting expression patterns of AchRe and its naturally occurring antisense transcript following time-dependent induction of differentiation. Figure 21a illustrates the position of riboprobes used for reverse transcription reaction. Figure 21b shows the reciprocal expression pattern of sense and antisense transcripts (indicated by arrows). Figure 21c shows the expression pattern of the antisense transcript alone.

FIGs. 22a-j illustrate results of northern blot analysis of sense/antisense clusters revealing positive signals for sense/antisense genes in the microarray analysis. Diagrams describing genomic organization of the relevant region for each of the sense/antisense clusters are included above the autoradiograms, and regions of overlap (including GenBank accession number) from which the strand-specific riboprobes were derived are included. Sense-antisense pair numbers are as they appear in the microarray (as depicted in Table S2 on the attached CD-ROM2 and in conversion Table 6). Figure 22a reveals expression patterns of randomly selected sequence pair number 235, denoted as Rand 235 in Table 6. Similarly, Figure 22b corresponds to pair number 173, Figure 22c to pair number 248, Figure 22d to pair number 6, Figure 22e to pair number 216, Figure 22f to pair number 239, Figure 22g to pair number 202, Figure 22h to pair number 114, Figure 22i to pair number 188, and Figure 22j to pair number 223. Eight pairs (Figures 22a-h) evaluated revealed positive signals for both sense and antisense expression, while two (Figures 22i-j) revealed a positive signal for only one of the genes, with the counterpart being a known RefSeq mRNA.

FIG. 23 is a Table depicting expression patterns in various cell lines and tissues as probed with a subset of 264 pairs from the putative sense/antisense dataset

of the present invention. The pairs are denoted by the pair number and described in Table\_S1 of CD-ROM2. "C" and "AC" denote the two counterpart probes. Expression was also verified for positive controls, including the ubiquitously expressed genes gapdh, actin, hsp70 and gnb211 in various concentrations, and 11 previously documented sense/antisense pairs. Expression thresholds were verified and indicated as "+", if the probe passed the threshold in at least one cell line or tissue or "-", if the probe did not pass the threshold in all experiments. In cases where both the sense and the antisense oligo passed the expression threshold, the antisense was declared "verified". In cases where only one of the probes passed the expression threshold, but the other probe was fully contained within a known mRNA deposited in GenBank, the antisense was declared "indirectly verified". Normalization for microarray signals was conducted as described in the methods section. Rji ratios were obtained for each cell line/tissue assessed. Cases of flagged-out spots for which there was no information were marked "-1.00". Data represent values of the two reciprocal experiments.

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FIG. 24a is a sequence alignment showing a 5'-5' overlap between Nicastrin (NCSTN, GenBank Accession No. NM\_015331) and coatomer protein complex subunit  $\alpha$  (COPA, GenBank Accession No. NM\_004371).

FIG. 24b is a histogram showing expression of NCSTN and two isoforms of COPA in a number of samples, as determined by Affymetrix U133 microarray. The expression levels of the long variant of COPA are shown in purple, while the expression levels of NCSTN are in yellow. The expression levels in different samples 1-5 are from different microarray experiments.

FIG. 25a is a sequence alignment showing a 3'-3' overlap between IL-24 (GenBank Accession No. NM\_006850) and TOSO (GenBank Accession No. NM\_005449).

FIG. 25b shows automatic annotation for IL-24 and TOSO obtained using the annotation platform described in Example 10 of the Examples section, which follows.

### DESCRIPTION OF THE PREFERRED EMBODIMENTS

The present invention is of methods of identifying naturally occurring antisense transcripts, which can be used in kits and methods for quantifying gene

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expression levels. Specifically, the antisense molecules and related oligonucleotides generated according to information derived therefrom of the present invention can be used to detect, quantify, or specifically regulate antisense and respective sense transcripts thereby enabling detection and treatment of a wide range of disorders.

The principles and operation of the present invention may be better understood with reference to the drawings and accompanying descriptions.

Before explaining at least one embodiment of the invention in detail, it is to be understood that the invention is not limited in its application to the details of construction and the arrangement of the components set forth in the following description or illustrated in the drawings described in the Examples section. The invention is capable of other embodiments or of being practiced or carried out in various ways. Also, it is to be understood that the phraseology and terminology employed herein is for the purpose of description and should not be regarded as limiting.

#### Terminology

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As used herein, the term "oligonucleotide" refers to a single stranded or double stranded oligomer or polymer of ribonucleic acid (RNA) or deoxyribonucleic acid (DNA) or mimetics thereof. This term includes oligonucleotides composed of naturally-occurring bases, sugars and covalent internucleoside linkages (e.g., backbone) as well as oligonucleotides having non-naturally-occurring portions, which function similarly. Such modified or substituted oligonucleotides are often preferred over native forms because of desirable properties such as, for example, enhanced cellular uptake, enhanced affinity for nucleic acid target and increased stability in the presence of nucleases.

The term "antisense" refers to a complementary strand of an mRNA transcript e.g., antisense RNA.

The phrase "naturally occurring antisense transcripts" refers to RNA transcripts encoded from an antisense strand of the DNA. These endogenous transcript exhibit at least partial complementarity to mRNA transcripts transcribed from the sense strand of a DNA, also termed sense transcripts. *cis*-encoded naturally occurring antisense transcripts are transcribed from the same locus as the sense

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transcripts. *trans*-encoded antisense transcripts are transcribed from a different locus than the respective sense transcripts.

The phrase "antisense strand" or "anticoding strand" refers to a strand of DNA, which serves as a template for mRNA transcription and as such is complementary to the mRNA transcript formed.

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The phrase "sense strand" or "coding strand" refers to the strand of DNA, which is identical to the mRNA transcript formed.

The phrase "complementary DNA" (cDNA) refers to the double stranded or single stranded DNA molecule, which is synthesized from a messenger RNA template.

The phrase "sense oriented polynucleotides" refers to polynucleotide sequences of a complementary or genomic DNA. Such polynucleotide sequences can be from exon regions, in which case they can encode mRNAs or portions thereof, or from intron regions, in which case they typically do not encode mRNA or portions thereof.

The term "contig" refers to a series of overlapping sequences with sufficient identity to create a longer contiguous sequence.

The term "cluster" refers to a plurality of contigs all derived, with a high degree of probability, from a single gene. Clusters are generally formed based upon a specified degree of homology and overlap (e.g., a stringency). The different contigs in a cluster do not typically represent the entire sequence of the gene, rather the gene may comprise one or more unknown intervening sequences between the defined contigs.

The phrase "open reading frame" (ORF) refers to a nucleotide sequence, which could potentially be translated into a polypeptide. Such a stretch of sequence is uninterrupted by a stop codon. An ORF that represents the coding sequence for a full protein begins with an ATG "start" codon and terminates with one of the three "stop" codons. For the purposes of this application, an ORF may be any part of a coding sequence, with or without start and/or stop codons. For an ORF to be considered as a good candidate for coding for a bona fide cellular protein, a minimum size requirement is often set, for example, a stretch of DNA that would code for a protein of 50 amino acids or more. An ORF is not usually considered an equivalent to a gene

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or locus until a phenotype is associated with a mutation in the ORF, an mRNA transcript for a gene product generated from the ORF's DNA has been detected, and/or the ORF's protein product has been identified.

The term "annotation" refers to a functional or structural description of a sequence, which may include identifying attributes such as locus name, poly(A)/poly(T) tail and/or signal, key words, Medline references and orientation cloning data.

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Naturally occurring antisense molecules can play a role in sense transcription stability and function (e.g. translation). To date, most, if not all of the information relating to naturally occurring antisense transcripts was obtained by either low efficiency computational approaches (described hereinabove) or by approaches utilizing RNase protection assays, northern blot analysis, strand-specific RT PCR, subtractive hybridization, differential plaque hybridization, affinity chromatography, electrospray mass spectrometry and the like. These methods, though highly reliable, are extremely laborious, time consuming and are directed at individual target transcripts. As such, current approaches for uncovering antisense transcripts can be used to detect a negligible portion of the number of naturally occurring antisense molecules thought to exist.

As described hereinunder and in the Examples section, which follows, the present invention provides a novel approach for systematically identifying naturally occurring antisense molecules.

Aside from large scale applicability, the present method can be used to identify naturally occurring antisense molecules even in cases where the antisense transcriptional unit is localized to an intron of an expressed gene or to a different locus than the complementary sense encoding gene (e.g., trans-encoded antisense), or in cases where the antisense molecule lacks an open reading frame or appreciable complementarity to known sense molecules. Antisense transcripts uncovered according to the teachings of the present invention can be used for detecting and accurately quantifying respective sense counterparts as well as for sensibly designing artificial antisense molecules suitable for down-regulation of sense counterparts.

Thus, according to one aspect of the present invention there is provided a method of identifying putative naturally occurring antisense transcripts.

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The method according to this aspect of the present invention is effected by the following steps.

First, sense-oriented polynucleotide sequences of a first database are computationally aligned with expressed polynucleotide sequences of a second database.

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Following computational alignment, expressed polynucleotide sequences are analyzed according to one or more criteria for their ability to hybridize or form a duplex or partial complementation with the sense-oriented polynucleotide sequences (further detailed hereinbelow and in the Examples section which follows).

Expressed polynucleotide sequences which are capable of forming a duplex with sense oriented sequences are considered as putative naturally occurring antisense molecules and as such can be stored in a database which can be generated by a suitable computing platform.

Final confirmation of computationally obtained putative naturally occurring antisense molecules can be effected either computationally or preferably by using suitable laboratorial methodologies, based on nucleotide hybridization including RNase protection assay, subtractive hybridization, differential plaque hybridization, affinity chromatography, electrospray mass spectrometry, northern analysis, RT-PCR and the like (for further details see the Examples section).

Information derived from the sequence, sense position and other structure characteristics of the naturally occurring antisense transcripts identified according to the teachings of the present invention can be used to quantify respective sense transcripts of interest or to generate corresponding artificial antisense polynucleotides, which can be packed in diagnostic or therapeutic kits and implemented in various therapeutic and diagnostic methods.

Expressed polynucleotide sequences used as a potential source for identifying naturally occurring antisense transcripts according to this aspect of the present invention are preferably libraries of expressed messenger RNA [i.e., expressed sequence tags (EST), cDNA clones, contigs, pre-mRNA, etc.] obtained from tissue or cell-line preparations which can include genomic and/or cDNA sequence.

Expressed polynucleotide sequences, according to this aspect of the present invention can be retrieved from pre-existing publicly available databases (i.e.,

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GenBank database maintained by the National Center for Biotechnology Information (NCBI), part of the National Library of Medicine, and the TIGR database maintained by The Institute for Genomic Research) or private databases (i.e., the LifeSeq.<sup>TM</sup> and PathoSeq.<sup>TM</sup> databases available from Incyte Pharmaceuticals, Inc. of Palo Alto, CA).

Alternatively, the sequence database of the expressed polynucleotide sequences utilized by the present invention can be generated from sequence libraries (e.g., cDNA libraries, EST libraries, mRNA libraries and others). cDNA libraries are suitable sources for expressed sequence information.

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Generating a sequence database in such a case is typically effected by tissue or cell sample preparation, RNA isolation, cDNA library construction and sequencing.

It will be appreciated that such cDNA libraries can be constructed from RNA isolated from whole organisms, tissues, tissue sections, or cell populations. Libraries can also be constructed from tissue reflecting a particular pathological or physiological state. Of particular interest are libraries constructed from sources associated with certain disease states, including malignant, neoplastic, hyperplastic tissues and the like.

Once raw sequence data is obtained, sequences are selected and preferably annotated before stored in a database. Selection proceeds according to one or more sequence criterion, which will be further detailed hereinunder. The editing, annotation and selection process is divided into two stages of processing. One stage comprises removal of repetitive, redundant or non-informative and contaminant sequences. The second stage involves selection of suitable candidates of putative naturally occurring antisense sequences.

The following section describes the different selection criteria which can be used for sequence filtering.

Vector contamination - "chops" vector elements and linker motifs used for the process of cloning from desired expressed nucleotide sequences. This selection can be effected by screening manually updated databases of sequences included in commonly used expression or cloning vectors.

Contaminating sequences - includes sequences which are derived from an undesired source. Such sequences can be recognized by their nucleotide distribution and/or by homology searches such as alignment searches using any sequence

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alignment algorithm such as BLAST (Basic Local Alignment Search Tool, available through www.ncbi.nlm.nih.gov/BLAST) or the Smith-Waterman algorithm. Other contaminating sequences may include sequences exhibiting high occurrence of dinucleotide distribution mostly related to sequencing artifacts and ribosomal RNA sequences.

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Repetitive elements and low complexity sequences - eliminates or masks expressed sequences comprising known repetitive elements (ALU, L1 etc.) and low complexity sequences (i.e., a di- or tri-nucleotide repeat). Such elimination is preferably effected by comparison with database of known repetitive elements. It will be appreciated that this type of selection is mostly species specific. Masking of low complexity sequences can be effected by substituting an N (i.e., an inert character) for the actual nucleotide (i.e., G, A, T, or C). Masking of low complexity sequences facilitates further computational analysis and maintains the spacing of the molecule.

Sequence length - preferred expressed sequences are of a length between 20–2000, preferably 20-1000, more preferably 20-500, most preferably 20-300 base pairs.

Sequence annotation — expressed sequences retrieved from external databases, i.e., GenBank, oftentimes include an annotation which indicates direction of the sequencing of the insert clone (i.e., 5' or 3' direction). Sequence annotation, though "noisy" by nature due to multiple entries from various sources; artifacts taking place during directional cloning and incidence of palindromic eight-cutter restriction sites located at the end of the sequence, can serve as an important tool for deducing strand identity using dedicated computer software which are further discussed hereinunder

Intron splice site consensus sequence intron splice site sharing— intron sequences nearly always begin with a di-nucleotide sequence of GT ("splice donor") and end with an AG ("splice acceptor") preceded by a pyrimidine-rich tract. This consensus sequence is part of the signal for splicing. Intron splice site consensus sequence on the complementary strand (e.g., antisense strand) begins with CT and ends with AC. Thus, combined with genomic data, expressed sequences having a GT...AG can be considered as sense-oriented sequences, while a CT...AC pattern is considered as an antisense oriented sequence. This selection criterion is very stringent since only negligible portions of introns have a CT...AC pattern. Sequences

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that share a similar splicing pattern, as deduced by alignment to genomic data, may be considered as having the same sense orientation, also termed herein as "intron sharing". It will be appreciated by one skilled in the art that using these selection criteria requires a careful and accurate alignment of expressed sequences to genomic sequence.

Poly(A) tails and Poly(T) heads – most eukaryotic mRNA molecules contain a poly-adenylation [poly(A)] tail at their 3' end. This poly(A) tail is not encoded by DNA. Therefore an expressed sequence which has a poly(A) tail can be considered as sense oriented. Similarly, poly(T) heads, which are not encoded from a genomic sequence indicate that a sequence is of the opposite direction, namely antisense oriented. Notably, genomically encoded Poly(A) tails and poly(T) heads provide no information as to the sequence orientation.

Poly(A) signal – some mature mRNA transcripts contain internal AAUAAA sequence. This internal sequence is part of an endonuclease cleavage signal. Following cleavage by the endonuclease, a poly(A) polymerase adds about 250 A residues to the 3' end of the transcript. Hence, expressed sequences containing a poly(A) signal can be considered as sense oriented.

Rare restriction site used for cloning— for example, eight cutter endonucleases which cleave 8-mer palindromic sequences and are characterized by a low frequency of cutting often used in genome mapping and EST library preparations (e.g., NotI. Commercially available from Promega: www.promega.com). Therefore, when a cluster of overlapping expressed sequences is characterized by a portion of sequences starting with a digestion site and another portion ending with the same, these sequences may be considered as encoded from the same strand. However, any endonuclease capable of digesting a palindromic sequence (i.e., XhoI, SalI, PacI etc.) may also affect distorted sequence clustering, therefore strand orientation is preferably effected using other parameters as well.

Sequence overlap - sequences that completely overlap are considered to have the same strand orientation.

The above-described parameters are used individually or in combination to analyze the expressed polynucleotide sequences so as to select anti-sense oriented sequences.

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Selection can be effected on the basis of a single criterion or several criteria considered individually or in combination.

In cases where several criteria are examined, a scoring system e.g., a scoring matrix, is preferably used.

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Since in some cases identifying an intron splicing consensus site may be more important than both sequence annotation and NotI alignment, while in others, detection of poly(A) tails and poly(T) heads might be the most significant criterion, the use of a scoring matrix in which each criterion is weighted enables one to select qualified antisense transcripts.

Such a scoring matrix can list the various expressed polynucleotide sequences across the X-axis of the matrix while each criterion can be listed on the Y-axis of the matrix. Criteria include both a predetermined range of values from which a single value is selected from each sequence, and a weight. Each sequence is scored at each criterion according to its value and the weight of the criterion.

When using such a scoring matrix the scores of each criterion of a specific sequence are summed and the results are analyzed.

Expressed sequences which exhibit a total score greater than a particular stringency threshold are grouped as members of either a sense-oriented sequence set or antisense-oriented sequence set; the higher the score the more stringent the criteria of grouping.

It will be appreciated that the above-described analysis can take place prior to computational alignment to sense oriented sequences, i.e., during the process of editing the expressed sequence database, which is, described hereinabove. Alternatively, selection can take place following computational alignment, thus further facilitating identification of proper duplex formation between the sense oriented polynucleotide sequences and expressed polynucleotide sequences.

Genomic DNA or a portion thereof is preferably used as sense-oriented sequence data according to this aspect of the present invention. It is conceivable that the present invention can determine sense orientation and antisense orientation of a database of expressed sequences simply by computationally aligning the sequences of the expressed database onto the genome, and finding whether two complementary expressed sequences hybridize to the genome (e.g., virtually generate a double

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stranded portion thereof). Such two overlapping sequences constitute sense and naturally occurring antisense transcripts.

Utilizing genomic DNA as a sense oriented template is preferred for the following reasons: (i) identifying trans-encoded antisense transcripts; (ii) analyzing intron splice consensus site and intron sharing; (iii) omitting genomically encoded poly(A) and poly(T) sequences; and (iv) analyzing sequences encompassing eight-cutter restriction sites.

Computational alignment of expressed polynucleotide sequences to the sense-oriented polynucleotide sequences (e.g., genomic sense sequences) can be effected using any commercially available alignment software, including sequence alignment tools utilizing algorithm such as BLAST (Basic Local Alignment Search Tool, available through www.ncbi.nlm.nih.gov/BLAST) or Smith-Waterman.

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Assembly software is preferably used according to this aspect of the present invention. Such software is of high value when complete genomic information is unavailable or when handling large amounts of expressed sequence data. A number of commonly used computer software fragment read assemblers capable of forming clusters of expressed sequences are now available. These packages include but are not limited to, The TIGR Assembler [Sutton G. et al. (1995) Genome Science and Technology 1:9-19], GAP [Bonfield JK. et al. (1995) Nucleic Acids Res. 23:4992-4999], CAP2 [Huang X. et al. (1996) Genomics 33:21-31], The Genome Construction Manager [Laurence CB. Et al. (1994) Genomics 23:192-201], Bio Image Sequence Assembly Manager, SeqMan [Swindell SR. and Plasterer JN. (1997) Methods Mol. Biol. 70:75-89], LEADS and GenCarta (Compugen Ltd. Israel).

Computer assembly and alignment programs can be modified to incorporate sequence criteria for determining sense or antisense orientation of expressed nucleotide sequences, as described hereinabove. Thereby, avoiding deliberate inversion of sequences during the assembly process, while ignoring the natural orientation of the sequences (i.e., sense or antisense orientation). Figure 1 illustrates results of expressed sequence assembly against genomic data and final distinction between sense oriented transcripts and antisense oriented transcripts of a single gene.

Following a proper alignment of expressed sequences to sense oriented polynucleotide sequences, duplexes are identified. The term "duplex" is used herein

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to indicate that a sequence identified according to this aspect of the present invention is complementary to a sense-oriented polynucleotide sequence. Complementation may be to a portion of the sense sequence, i.e., a region thereof, or alternatively, to two or more non-contiguous regions, which may be separated by one or more nucleotides on the sense strand.

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The formation of sense-antisense duplexes does not require 100 % complementation nor does it require participation of the entire sense/antisense transcript sequence. The sense or antisense transcripts can have a secondary structure (e.g., stem and loop) generated by intra-sequence hybridization which can prevent specific sequence regions in the sense or antisense transcripts from participating in duplex formation. Thus, the antisense of the sequence identified, according to this aspect of the present invention can be complementary to its sense counterparts in several regions, which are not necessarily close to each other when the sense transcript is in linear form.

Although any length of sequence overlap can generate a duplex, overlaps of at least about 5, preferably about 20, more preferably about 30, even more preferably about 40 bp are considered more indicative of true sense-antisense duplex formation.

The method of uncovering putative antisense transcripts of the present invention is preferably carried out using a dedicated computational system.

Thus, according to another aspect of the present invention and as illustrated in Figure 2, there is provided a system for generating a database of putative naturally occurring antisense sequences which system is referred to hereinunder as system 10.

System 10 includes at least one central processing unit (CPU) 12, which executes a software application designed and configured for aligning sense oriented polynucleotide sequences with expressed polynucleotide sequences and identifying expressed polynucleotide sequences which are capable of forming a duplex with the sense oriented polynucleotide sequences, thereby recognizing putative naturally occurring antisense transcripts. System 10 may also include a user input interface 14 [e.g., a keyboard and/or a cursor control device (e.g., a joy stick)] for inputting database or database related information, and a user output interface 16 (e.g., a monitor) for providing database information to a user.

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System 10 may also include random access memory 24, ROM memory 26, a modem 28 and a graphic processing unit (GPU) 30.

System 10 preferably stores sequence information of the putative antisense transcripts identified thereby on an internal and/or external storage device 20 such as a magnetic, optico-magnetic or optical disk as a database of putative antisense transcript sequences. Such a database further includes information pertaining to database generation (e.g., source library), parameters used for selecting polynucleotide sequences, putative uses of the stored sequences, and various other annotations (as described below) and references which relate to the stored sequences or respective sense transcripts.

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The hardware elements of system 10 may be tied together by a common bus or several interlinked buses for transporting data between the various elements. Examples of system 10 include but are not limited to, a personal computer, a work station, a mainframe and the like.

System 10 of the present invention may be used by a user to query the stored database of sequences, to retrieve nucleotide sequences stored therein or to generate polynucleotide sequences from user inputted sequences.

The methods of the present invention can be effected by any software application executable by system 10. The software application can be stored in random access memory 24, or internal and/or external data storage device 20 of system 10.

The database generated and stored by system 10 can be accessed by an on-site user of system 10, or by a remote user communicating with system 10, through for example, a terminal or thin client.

The latter configuration is best exemplified by the client-server system 50 which is shown in Figure 3. System 50 is configured to perform similar functions to those performed by system 10. In system 50, communication between a remote client 18 (e.g., computer, PDA, cell phone etc) and processing unit 12 of a local server or computer is typically effected via a communication network 32. Communication network 32 can be any private or public communication network including, but not limited to, a standard or cellular telephony network, a computer

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network such as the Internet or intranet, a satellite network or any combination thereof.

As illustrated in Figure 3, communication network 32 can include one or more communication servers 22 (one shown in Figure 3) which serve for communicating data pertaining to the sequence of interest between remote client 18 and processing unit 12. Thus, a request for data or processed data is communicated from remote client 18 to processing unit 12 through communication network 32 and processing unit 12 sends back a reply which includes data or processed data to remote client 18. Such a system configuration is advantageous since it enables users of system 50 to store and share gathered information and to collectively analyze gathered information.

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Such remote configuration can be implemented over a local area network (LAN) or a wide area network (WAN) using standard communication protocols.

It will be appreciated that existing computer networks such as the Internet can provide the infrastructure and technology necessary for supporting data communication between any number of users 18 and processors 12.

Novel polynucleotide sequences uncovered using the above-described methodology can be used in various clinical applications (e.g., therapeutic and diagnostic) as is further described hereinbelow.

A polynucleotide sequence of the present invention refers to a single or double stranded nucleic acid sequence which is isolated and provided in the form of an RNA sequence, a complementary polynucleotide sequence (cDNA), a genomic polynucleotide sequence and/or a composite polynucleotide sequence (e.g., a combination of the above.

As used herein the phrase "complementary polynucleotide sequence" refers to a sequence, which results from reverse transcription of messenger RNA using a reverse transcriptase or any other RNA dependent DNA polymerase. Such a sequence can be subsequently amplified *in vivo* or *in vitro* using a DNA dependent DNA polymerase.

As used herein the phrase "genomic polynucleotide sequence" refers to a sequence derived (isolated) from a chromosome and thus it represents a contiguous portion of a chromosome.

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As used herein the phrase "composite polynucleotide sequence" refers to a sequence, which is composed of genomic and cDNA sequences. A composite sequence can include some exonal sequences required to encode the polypeptide of the present invention, as well as some intronic sequences interposing therebetween. The intronic sequences can be of any source, including of other genes, and typically will include conserved splicing signal sequences. Such intronic sequences may further include cis acting expression regulatory elements.

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Thus, the present invention encompasses nucleic acid sequences described hereinabove; fragments thereof, sequences hybridizable therewith, sequences homologous thereto (e.g., at least about 50 %, at least about 55 %, at least about 60%, at least about 65 %, at least about 70 %, at least about 75 %, at least about 80 %, at least about 85 %, at least about 95 % or more say 100 % homologous to the nucleic acid sequences set forth in the file seqs\_125 or seqs\_133 of the enclosed CD-ROM1), sequences encoding similar polypeptides with different codon usage, altered sequences characterized by mutations, such as deletion, insertion or substitution of one or more nucleotides, either naturally occurring or man induced, either randomly or in a targeted fashion.

In cases where the polynucleotide sequences of the present invention encode previously unidentified polypeptides, the present invention also encompasses novel polypeptides or portions thereof, which are encoded by the isolated polynucleotide and respective nucleic acid fragments thereof described hereinabove.

Thus, the present invention also encompasses polypeptides encoded by the polynucleotide sequences of the present invention. The present invention also encompasses homologues of these polypeptides, which can optionally be at least about 50 %, at least about 55 %, at least about 60%, at least about 65 %, at least about 70 %, at least about 75 %, at least about 80 %, at least about 85 %, at least about 95 % or more say 100 % homologous to the amino acid sequences set forth in the file pep\_seqs\_133 of the enclosed CD-ROM3 Finally, the present invention also encompasses fragments of the above described polypeptides and polypeptides having mutations, such as deletions, insertions or substitutions of one or more amino acids, either naturally occurring or man induced, either randomly or in a targeted fashion.

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Thus, data extracted from the database of naturally occurring antisense transcripts of the present invention is of high value for designing oligonucleotides suitable for transcript detection and quantification and for sensibly designing artificial antisense oligonucleotides for down-regulation and elimination of a transcript of interest or changing the balance between sense and complementary antisense transcripts. The possibility of up-regulating a transcript of interest using naturally occurring antisense based-oligonucleotides generated according to the teachings of the present invention is also realized. In addition, data extracted from the database of naturally occurring antisense transcripts may also be used for assessing endogenous double stranded-RNA also termed interfering RNA, which may distort gene-expression due to either RNA-degradation, DNA-methylation, polycomb mediated suppression etc. (for details see the Background section hereinabove).

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Antisense technology is based upon the pairing of an artificially designed antisense oligonucleotide, with a target nucleic acid. The use of antisense technology requires a complementarity of the antisense nucleotide sequence to a target zone of an mRNA target sequence that will effect inhibition of gene expression [reviewed in Stein CA. and Cohen JS. (1988) Cancer Res. 48:2659-68]. Based on empiric experience it was shown that the success of antisense technology relies on: (i) cellular uptake; (ii) stability of artificial antisense molecules under physiological conditions (i.e., cellular pH, endonucleases etc.); (iii) complementation between the oligonucleotide and a single stranded target sequence (i.e., tertiary structure of target RNA will not form a good target); (iv) binding specificity of antisense oligonucleotide so as not to compete with other RNA binders (e.g. proteins) to thereby maintain an effective antisense concentration.

Various attempts to employ antisense technology while considering the above discussed limitations included using large amounts of oligonucleotides to overcome cellular uptake and environmental barriers and chemically modified antisense nucleotide compositions, for obtaining higher level of cellular stability. However, even in case where uptake difficulties are traversed, the step of target identification (i.e., RNA-target sequence region) continues to be the major bottleneck for successful implementation of antisense technology.

U.S. Pat. No: 6,183,966 discloses a method and an apparatus for ranking nucleic acid sequences based on stability of nucleic acid oligomer sequence binding interactions to select sequence zones for antisense targeting. This method however systematic, relies on thermodynamic analyses combined with numerous predictions which cannot be considered empirically accurate and reliable.

Thus according to another aspect of the present invention there is provided a method of designing artificial antisense transcripts.

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The method according to this aspect of the present invention is effected by the following steps.

First, structural and/or functional parameters pertaining to naturally occurring antisense transcripts are extracted/deduced from a database such as the one described hereinabove. These parameters may be generally deduced from all sequences stored in the database, or extracted from specific antisense sequences or preferably groups of antisense sequences.

Second, artificial antisense molecules of interest are designed according to the extracted parameters.

Such parameters may be divided into three groups, topographical parameters, functional parameters and structural parameters.

Topographical parameters - (i) position of sequence overlap on the sense transcript (i.e., coding region, 5'UTR, 3'UTR); (ii) position of the sequence overlap on the antisense transcript (end overlap, middle overlap, full overlap). (iii) length of overall sequence overlap; (iv) continuity or discontinuity of sequence overlap.

Structural parameters - pertains to both sense and antisense transcripts (i) tertiary structure (i.e., hairpin, helix, stem and loop, pseudoknot, and the like); (ii) single stranded versus double stranded regions; (iii) GC content; (iv) tandem Gs; (v) adenosine/inosine content; (vi) thermodynamic stability of tertiary structures; (vii) duplex melting point; (viii) methylations and other RNA modifications; (ix) RNA-protein interactions; and (x) transcript length.

Functional parameters - (i) alternative splicing; (ii) tissue expression; (iii) pathology specific expression; (iv) antisense promoters; (v) intron content; (vi) open reading frame in antisense transcript.

These parameters can be used individually or in combination, in which case, each parameter is preferably weighted according to its importance. Due to the multi-factorial design of artificial antisense transcripts according to this aspect of the present invention, employing a scoring system (described hereinabove) is preferably used to simplify and increase the accuracy of the process.

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Synthetic antisense oligonucleotides designed according to the teachings of the present invention can be generated according to any oligonucleotide synthesis method known in the art such as enzymatic synthesis or solid phase synthesis. Equipment and reagents for executing solid-phase synthesis are commercially available from, for example, Applied Biosystems. Any other means for such synthesis may also be employed; the actual synthesis of the oligonucleotides is well within the capabilities of one skilled in the art.

Oligonucleotides used according to this aspect of the present invention are those having a length selected from a range of from about 10 to about 200 bases, preferably from about 15 to about 150 bases, more preferably from about 20 to about 100 bases, most preferably from about 20 to about 50 bases.

The oligonucleotides of the present invention may comprise heterocylic nucleosides consisting of purines and the pyrimidines bases, bonded in a 3' to 5' phosphodiester linkage.

Preferably used oligonucleotides are those modified in either backbone, internucleoside linkages or bases, as is broadly described hereinunder. Such modifications can oftentimes facilitate oligonucleotide uptake and resistance to intracellular conditions.

Specific examples of preferred oligonucleotides useful according to this aspect of the present invention include oligonucleotides containing modified backbones or non-natural internucleoside linkages. Oligonucleotides having modified backbones include those that retain a phosphorus atom in the backbone, as disclosed in U.S. Pat. NOs: ,687,808; 4,469,863; 4,476,301; 5,023,243; 5,177,196; 5,188,897; 5,264,423; 5,276,019; 5,278,302; 5,286,717; 5,321,131; 5,399,676; 5,405,939; 5,453,496; 5,455,233; 5,466, 677; 5,476,925; 5,519,126; 5,536,821; 5,541,306; 5,550,111; 5,563,253; 5,571,799; 5,587,361; and 5,625,050.

Preferred modified oligonucleotide backbones include, for example, phosphorothioates, chiral phosphorothioates, phosphorodithioates, phosphoriesters, aminoalkyl phosphoratesters, methyl and other alkyl phosphonates including 3'-alkylene phosphonates and chiral phosphonates, phosphinates, phosphoramidates including 3'-amino phosphoramidate and aminoalkylphosphoramidates, thionophosphoramidates, thionoalkylphosphonates, thionoalkylphosphotriesters, and boranophosphates having normal 3'-5' linkages, 2'-5' linked analogs of these, and those having inverted polarity wherein the adjacent pairs of nucleoside units are linked 3'-5' to 5'-3' or 2'-5' to 5'-2'. Various salts, mixed salts and free acid forms can also be used.

Alternatively, modified oligonucleotide backbones that do not include a phosphorus atom therein have backbones that are formed by short chain alkyl or cycloalkyl internucleoside linkages, mixed heteroatom and alkyl or cycloalkyl internucleoside linkages, or one or more short chain heteroatomic or heterocyclic internucleoside linkages. These include those having morpholino linkages (formed in part from the sugar portion of a nucleoside); siloxane backbones; sulfide, sulfoxide and sulfone backbones; formacetyl and thioformacetyl backbones; methylene formacetyl and thioformacetyl backbones; alkene containing backbones; sulfamate backbones; methyleneimino and methylenehydrazino backbones; sulfonate and sulfonamide backbones; amide backbones; and others having mixed N, O, S and CH2 component parts, as disclosed in U.S. Pat. Nos. 5,034,506; 5,166,315; 5,185,444; 5,214,134; 5,216,141; 5,235,033; 5,264,562; 5,264,564; 5,405,938; 5,434,257; 5,466,677; 5,470,967; 5,489,677; 5,541,307; 5,561,225; 5,596,086; 5,602,240; 5,610,289; 5,602,240; 5,608,046; 5,610,289; 5,618,704; 5,623, 070; 5,663,312; 5,633,360; 5,677,437; and 5,677,439.

Other oligonucleotides which can be used according to the present invention, are those modified in both sugar and the internucleoside linkage, i.e., the backbone, of the nucleotide units are replaced with novel groups. The base units are maintained for complementation with the appropriate polynucleotide target. An example for such an oligonucleotide mimetic, includes peptide nucleic acid (PNA). A PNA oligonucleotide refers to an oligonucleotide where the sugar-backbone is replaced with an amide containing backbone, in particular an aminoethylglycine backbone. The

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bases are retained and are bound directly or indirectly to aza nitrogen atoms of the amide portion of the backbone. United States patents that teach the preparation of PNA compounds include, but are not limited to, U.S. Pat. Nos. 5,539,082; 5,714,331; and 5,719,262, each of which is herein incorporated by reference. Other backbone modifications, which can be used in the present invention are disclosed in U.S. Pat. No:6,303,374.

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Oligonucleotides of the present invention may also include base modifications or substitutions. As used herein, "unmodified" or "natural" bases include the purine bases adenine (A) and guanine (G), and the pyrimidine bases thymine (T), cytosine (C) and uracil (U). Modified bases include but are not limited to other synthetic and natural bases such as 5-methylcytosine (5-me-C), 5-hydroxymethyl cytosine, xanthine, hypoxanthine, 2-aminoadenine, 6-methyl and other alkyl derivatives of adenine and guanine, 2-propyl and other alkyl derivatives of adenine and guanine, 2thiouracil, 2-thiothymine and 2-thiocytosine, 5-halouracil and cytosine, 5-propynyl uracil and cytosine, 6-azo uracil, cytosine and thymine, 5-uracil (pseudouracil), 4thiouracil, 8-halo, 8-amino, 8-thiol, 8-thioalkyl, 8-hydroxyl and other 8-substituted adenines and guanines, 5-halo particularly 5-bromo, 5-trifluoromethyl and other 5substituted uracils and cytosines, 7-methylguanine and 7-methyladenine, 8azaguanine and 8-azaadenine, 7-deazaguanine and 7-deazaadenine and 3deazaguanine and 3-deazaadenine. Further bases include those disclosed in U.S. Pat. No: 3,687,808, those disclosed in The Concise Encyclopedia Of Polymer Science And Engineering, pages 858-859, Kroschwitz, J. I., ed. John Wiley & Sons, 1990, those disclosed by Englisch et al., Angewandte Chemie, International Edition, 1991, 30, 613, and those disclosed by Sanghvi, Y. S., Chapter 15, Antisense Research and Applications, pages 289-302, Crooke, S. T. and Lebleu, B., ed., CRC Press, 1993. Such bases are particularly useful for increasing the binding affinity of the oligomeric These include 5-substituted pyrimidines, 6compounds of the invention. azapyrimidines and N-2, N-6 and O-6 substituted purines, including 2aminopropyladenine, 5-propynyluracil and 5-propynylcytosine. 5-methylcytosine substitutions have been shown to increase nucleic acid duplex stability by 0.6-1.2 °C. [Sanghvi YS et al. (1993) Antisense Research and Applications, CRC Press, Boca

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Raton 276-278] and are presently preferred base substitutions, even more particularly when combined with 2'-O-methoxyethyl sugar modifications.

Another modification of the oligonucleotides of the invention involves chemically linking to the oligonucleotide one or more moieties or conjugates, which enhance the activity, cellular distribution or cellular uptake of the oligonucleotide. Such moieties include but are not limited to lipid moieties such as a cholesterol moiety, cholic acid, a thioether, e.g., hexyl-S-tritylthiol, a thiocholesterol, an aliphatic chain, e.g., dodecandiol or undecyl residues, a phospholipid, e.g., di-hexadecyl-rac-glycerol or triethylammonium 1,2-di-O-hexadecyl-rac-glycero-3-H-phosphonate, a polyamine or a polyethylene glycol chain, or adamantane acetic acid, a palmityl moiety, or an octadecylamine or hexylamino-carbonyl-oxycholesterol moiety, as disclosed in U.S. Pat. No: 6,303,374.

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It is not necessary for all positions in a given oligonucleotide molecule to be uniformly modified, and in fact more than one of the aforementioned modifications may be incorporated in a single compound or even at a single nucleoside within an oligonucleotide.

The present invention also includes antisense molecules, which are chimeric molecules. "Chimeric" antisense molecules", are oligonucleotides, which contain two or more chemically distinct regions, each made up of at least one nucleotide. These oligonucleotides typically contain at least one region wherein the oligonucleotide is modified so as to confer upon the oligonucleotide increased resistance to nuclease degradation, increased cellular uptake, and/or increased binding affinity for the target polynucleotide. An additional region of the oligonucleotide may serve as a substrate for enzymes capable of cleaving RNA:DNA or RNA:RNA hybrids. An example for such include RNase H, which is a cellular endonuclease which cleaves the RNA strand of an RNA:DNA duplex. Activation of RNase H, therefore, results in cleavage of the RNA target, thereby greatly enhancing the efficiency of oligonucleotide inhibition of gene expression. Consequently, comparable results can often be obtained with shorter oligonucleotides when chimeric oligonucleotides are used, compared to phosphorothioate deoxyoligonucleotides hybridizing to the same target region. Cleavage of the RNA target can be routinely detected by gel electrophoresis and, if necessary, associated nucleic acid hybridization techniques known in the art.

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Chimeric antisense molecules of the present invention may be formed as composite structures of two or more oligonucleotides, modified oligonucleotides, as described above. Representative U.S. patents that teach the preparation of such hybrid structures include, but are not limited to, U.S. Pat. Nos. 5,013,830; 5,149,797; 5,220,007; 5,256,775; 5,366,878; 5,403,711; 5,491,133; 5,565,350; 5,623,065; 5,652,355; 5,652,356; and 5,700,922, each of which is herein fully incorporated by reference.

Finally, chimeric oligonucleotides of the present invention can comprise a ribozyme sequence. Ribozymes are being increasingly used for the sequence-specific inhibition of gene expression by the cleavage of mRNAs. Several ribozyme sequences can be fused to the oligonucleotides of the present invention. These sequences include but are not limited ANGIOZYME specifically inhibiting formation of the VEGF-R (Vascular Endothelial Growth Factor receptor), a key component in the angiogenesis pathway, and HEPTAZYME, a ribozyme designed to selectively destroy Hepatitis C Virus (HCV) RNA, (Ribozyme Pharmaceuticals, Incorporated - WEB home page).

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Naturally occurring antisense sequences uncovered using the teachings of the present invention can be annotated using information available from a number of publicly available sources of gene annotations well known to those of skill in the art. Examples include, but are not limited to Locus Link and RefSeq: GO annotations, Gencarta (described in Example 10 of the Examples section), GeneCards, GeneLynx, TIGR and the like.

Annotative information obtained using the Gencarta (Compugen, Tel-Aviv, Israel) database is set forth in the file "annotations\_133" of the enclosed CD-ROM3. The relation between the co-regulated nucleotide sequences of the present invention and corresponding polypeptide sequences is described in Trans2Pep file in the enclosed CD-ROM3.

Elucidating protein function, pattern of expression, therapeutic and diagnostic roles, allows for the design of highly specific and effective clinical tools, for a wide range of diseases as described in the Examples section which follows.

For example, gene products (nucleic acid and/or protein products), which exhibit tumor specific expression (i.e., tumor associated antigens, TAAs) can be

utilized for in-vitro generation of antibodies and/or for in-vivo immunization/cancer vaccination, essentially eliciting an immune response against such gene products and cells expressing same (see e.g., U.S. Pat. No. 4,235,877, Vaccine preparation is generally described in, for example, M. F. Powell and M. J. Newman, eds., "Vaccine Design (the subunit and adjuvant approach)," Plenum Press (NY, 1995); Other references describing adjuvants, delivery vehicles and immunization in general include Rolland, Crit. Rev. Therap. Drug Carrier Systems 15:143-198, 1998; Fisher-Hoch et al., Proc. Natl. Acad. Sci. USA 86:317-321, 1989; Flexner et al., Ann. N.Y Acad. Sci. 569:86-103, 1989; Flexner et al., Vaccine 8:17-21, 1990; U.S. Pat. Nos. 4,603,112, 4,769,330, and 5,017,487; WO 89/01973; U.S. Pat. No. 4,777,127; GB 2,200,651; EP 0,345,242; WO 91/02805; Berkner, Biotechniques 6:616-627, 1988; Rosenfeld et al., Science 252:431-434, 1991; Kolls et al., Proc. Natl. Acad. Sci. USA 91:215-219, 1994; Kass-Eisler et al., Proc. Natl. Acad. Sci. USA 90:11498-11502, 1993; Guzman et al., Circulation 88:2838-2848, 1993; and Guzman et al., Cir. Res. 73:1202-1207, 1993; Ulmer et al., Science 259:1745-1749, 1993; Cohen, Science 259:1691-1692, 1993; U.S. Pat. Nos. 4,436,727; 4,877,611; 4,866,034 and 4,912,094; U.S. Pat. Nos. 6,008,200 and 5,856,462; Zitvogel et al., Nature Med. 4:594-600, 19980.

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Tumor-specific gene products of the present invention, in particular membrane bound, can be utilized as targeting molecules for binding therapeutic toxins, antibodies and small molecules, to thereby specifically target the tumor cell. Alternatively, neoplastic properties of tumor specific gene products (nucleic acid and/or protein products) of the present invention, may be beneficially used in the promotion of wound healing and neovascularization in ischemic conditions and diabetes.

Secreted variants of known autoantigens associated with a specific autoimmune syndrome, such as for example, those listed in Table 11, below, can be used to treat such syndromes. Typically, autoimmune disorders are characterized by a number of different autoimmune manifestations (e.g., multiple endocrine syndromes). For these reasons secreted variants may be used to treat any combination of autoimmune phenomena of a disease as detailed in Table 11 below. The therapeutic effect of these variants may be a result of (i) competing with autoantigens for binding with autoantibodies: (ii) antigen-specific immunotherapy, essentially suggesting that

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systemic administration of a protein antigen can inhibit the subsequent generation of the immune response to the same antigen (proven in mice models for Myasthenia Gravis and type I Diabetes).

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Biomolecular sequences, which are over-expressed in a pathology can be used as diagnostic markers, such as for cancer. Variants of autoantigens may also be used for diagnosis. The diagnosis of many autoimmune disorders is based on identification of autoantibodies specific to autoantigens known to be associated with an autoimmune condition. Most of the diagnostic techniques are based on having a recombinant form of the autoantigen and using it to look for serum autoantibodies. It is possible that currently considered autoantigens are not "true" autoantigens but rather variants thereof. For example, TPO is a known autoantigen for thyroid autoimmunity. It has been shown that its variant TPOzanelli also takes part in the autoimmune process and can bind the same antibodies as TPO [Biochemistry. 2001 Feb 27;40(8):2572-9.]. Antibodies formed against the true autoantigen may bind to other variants of the same gene due to sequence overlap but with reduced affinity. Novel splice variant of the genes in Table 11 may be revealed as true autoantigens, therefore their use for detection of autoantibodies is expected to result in a more sensitive and specific test.

Additionally, variants of known drug targets can be used in cases where the known drug has major side effects, the therapeutic efficacy of the known drug is moderate, the drug failed clinical trials due to one of the above. A drug which is specific to a new protein variant of the target or to the target only (without affecting the novel variant) is likely to have less side effects as compared with the original drug, higher efficacy and may treat different indications than the original drug.

For example, COX3, which is a variant of COX1, is known to bind COX inhibitors with a different affinity than COX1. This molecule is also associated with different physiological processes than COX1. Therefore, a compound specific to COX1 or compounds specific to COX3 would have lower side effects (by not affecting the other variant), treat different indications and treat successfully bigger populations.

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Polynucleotide sequence data (i.e., mRNAs and/or naturally occurring antisense transcripts thereof) obtained according to the teachings of the present invention may also be used for modulating the expression of a gene of interest.

For example, when a product of a gene of interest is an oncogene, it may be desirable to upregulate an expression of a naturally occurring antisense transcript thereof, which is in turn capable of downregulating expression of the gene product (i.e., the oncogene), to thereby inhibit the onset or progression of a malignant disease. See also Example 11 of the Examples section which follows.

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Alternatively, when a gene product of interest is a tumor suppressor gene it may be desirable to downregulate expression of a naturally occurring antisense molecule thereof to thereby elevate expression of the tumor suppressor gene and inhibit the onset or progression of a malignant disease.

Upregulation or downregulation of the naturally occurring antisense transcript of the gene product of interest, as described above, may be accompanied by upregulation or down regulation of the gene product itself as necessary (e.g., upregulation of a tumor suppressor gene and down regulation of an oncogene).

Agents for upregulating and down regulating gene products (i.e., mRNA or proteins) are summarized infra.

Upregulating expression of a naturally occurring antisense transcript of interest may be effected via the administration of at least one of the exogenous polynucleotide sequences of the present invention, ligated into a nucleic acid expression construct designed for expression of coding sequences in eukaryotic cells (e.g., mammalian cells). Accordingly, the exogenous polynucleotide sequence may be a DNA or RNA sequence encoding the naturally occurring antisense transcript of interest.

For therapeutic applications, the nucleic acid construct can be administered to an individual in need therefore by employing any suitable mode of administration described hereinbelow (i.e., in-vivo gene therapy). Alternatively, the nucleic acid construct can be introduced into an isolated cells, of for example, a cell culture, using an appropriate gene delivery vehicle/method (transfection, transduction, homologous recombination, etc.). The genetically modified cells thus generated can then be expanded in culture and returned to the individual (i.e., ex-vivo gene therapy).

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To enable cellular expression of the polynucleotides of the present invention, the nucleic acid construct of the present invention further includes at least one cis acting regulatory element. As used herein, the phrase "cis acting regulatory element" refers to a polynucleotide sequence, preferably a promoter, which binds a trans acting regulator and regulates the transcription of a coding sequence located downstream thereto.

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Any suitable promoter sequence can be used by the nucleic acid construct of the present invention.

Preferably, the promoter utilized by the nucleic acid construct of the present invention is active in the specific cell population transformed. Examples of cell type-specific and/or tissue-specific promoters include promoters such as albumin that is liver specific [Pinkert et al., (1987) Genes Dev. 1:268-277], lymphoid specific promoters [Calame et al., (1988) Adv. Immunol. 43:235-275]; in particular promoters of T-cell receptors [Winoto et al., (1989) EMBO J. 8:729-733] and immunoglobulins; [Banerji et al. (1983) Cell 33729-740], neuron-specific promoters such as the neurofilament promoter [Byrne et al. (1989) Proc. Natl. Acad. Sci. USA 86:5473-5477], pancreas-specific promoters [Edlunch et al. (1985) Science 230:912-916] or mammary gland-specific promoters such as the milk whey promoter (U.S. Pat. No. 4,873,316 and European Application Publication No. 264,166). The nucleic acid construct of the present invention can further include an enhancer, which can be adjacent or distant to the promoter sequence and can function in up regulating the transcription therefrom.

The nucleic acid construct of the present invention preferably also includes an appropriate selectable marker and/or an origin of replication. Preferably, the nucleic acid construct utilized is a shuttle vector, which can propagate both in *E. coli* (wherein the construct comprises an appropriate selectable marker and origin of replication) and be compatible for propagation in cells, or integration in a gene and a tissue of choice. The construct according to the present invention can be, for example, a plasmid, a bacmid, a phagemid, a cosmid, a phage, a virus or an artificial chromosome.

Examples of suitable constructs include, but are not limited to, pcDNA3, pcDNA3.1 (+/-), pGL3, PzeoSV2 (+/-), pDisplay, pEF/myc/cyto, pCMV/myc/cyto

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each of which is commercially available from Invitrogen Co. (www.invitrogen.com). Examples of retroviral vector and packaging systems are those sold by Clontech, San Diego, Calif., including Retro-X vectors pLNCX and pLXSN, which permit cloning into multiple cloning sites and the trasgene is transcribed from CMV promoter. Vectors derived from Mo-MuLV are also included such as pBabe, where the transgene will be transcribed from the 5'LTR promoter.

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Currently preferred in vivo nucleic acid transfer techniques include transfection with viral or non-viral constructs, such as adenovirus, lentivirus, Herpes simplex I virus, or adeno-associated virus (AAV) and lipid-based systems. Useful lipids for lipid-mediated transfer of the gene are, for example, DOTMA, DOPE, and DC-Chol [Tonkinson et al., Cancer Investigation, 14(1): 54-65 (1996)]. The most preferred constructs for use in gene therapy are viruses, most preferably adenoviruses, AAV, lentiviruses, or retroviruses. A viral construct such as a retroviral construct includes at least one transcriptional promoter/enhancer or locus-defining element(s), or other elements that control gene expression by other means such as alternate splicing, nuclear RNA export, or post-translational modification of messenger. Such vector constructs also include a packaging signal, long terminal repeats (LTRs) or portions thereof, and positive and negative strand primer binding sites appropriate to the virus used, unless it is already present in the viral construct. In addition, such a construct typically includes a signal sequence for secretion of the peptide from a host cell in which it is placed. Preferably the signal sequence for this purpose is a mammalian signal sequence or the signal sequence of the polypeptide variants of the present invention. Optionally, the construct may also include a signal that directs polyadenylation, as well as one or more restriction sites and a translation termination sequence. By way of example, such constructs will typically include a 5' LTR, a tRNA binding site, a packaging signal, an origin of second-strand DNA synthesis, and a 3' LTR or a portion thereof. Other vectors can be used that are non-viral, such as cationic lipids, polylysine, and dendrimers.

When the naturally occurring antisense transcript and/or gene product of interest are splice isoforms it is possible to promote expression of a specific splice variant by using antisense oligonucleotides, which are directed at splice sites of interest, thereby altering the splicing pattern of the gene. This approach has been

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successfully used for shifting the balance of expression of the two isoforms of Bcl-x [Taylor (1999) Nat. Biotechnol. 17:1097-1100; and Mercatante (2001) J. Biol. Chem. 276:16411-16417]; IL-5R [Karras (2000) Mol. Pharmacol. 58:380-387]; and c-myc [Giles (1999) Antisense Acid Drug Dev. 9:213-220].

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For example, interleukin 5 and its receptor play a critical role as regulators of hematopoiesis and as mediators in some inflammatory diseases such as allergy and asthma. Two alternatively spliced isoforms are generated from the IL-5R gene, which include (i.e., long form) or exclude (i.e., short form) exon 9. The long form encodes an intact membrane-bound receptor, while the shorter form encodes a secreted soluble non-functional receptor. Using 2'-O-MOE-oligonucleotides specific to regions of exon 9, Karras and co-workers (supra) were able to significantly decrease the expression of the wild type receptor and increase the expression of the shorter isoforms. Approaches which can be used to design and synthesize oligonucleotides according to the teachings of the present invention are described hereinbelow and by Sazani and Kole (2003) Progress in Moleclular and Subcellular Biology 31:217-239.

Upregulation at the protein level may be effected by providing the polypeptide gene product (i.e., either of the gene of interest or of the naturally occurring antisense transcript). It will be appreciated that since the bioavailability of large polypeptides is relatively small due to high degradation rate and low penetration rate, administration of polypeptides is preferably confined to small peptide fragments (e.g., about 100 amino acids).

Oligonucleotides for downregulating gene expression are described hereinabove.

Antibodies can also be used to down regulate activity of a gene product (i.e., protein) of interest. Methods of producing polyclonal and monoclonal antibodies as well as fragments thereof are well known in the art. See for example, Harlow and Lane, Antibodies: A Laboratory Manual, Cold Spring Harbor Laboratory, New York, 1988, incorporated herein by reference. Other methods for the generation of antibody fragments include for example, U.S. Pat. Nos. 4,036,945 and 4,331,647, and references contained therein; Porter, R. R. Biochem. J. 73: 119-126 (1959); Proc. Nat'l Acad. Sci. USA 69:2659-62 (1972); Whitlow and Filpula, Methods 2: 97-105 (1991); Bird et al., Science 242:423-426 (1988); Pack et al., Bio/Technology 11:1271-

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77 (1993); and U.S. Pat. No. 4,946,778. References for methods of humanizing non-human antibodies include Jones et al., Nature, 321:522-525 (1986); Riechmann et al., Nature 332:323-327 (1988); Verhoeyen et al., Science, 239:1534-1536 (1988); U.S. Pat. No. 4,816,567; Hoogenboom and Winter, J. Mol. Biol., 227:381 (1991); Marks et al., J. Mol. Biol., 222:581 (1991). The techniques of Cole et al. and Boerner et al. are also available for the preparation of human monoclonal antibodies [Cole et al., Monoclonal Antibodies and Cancer Therapy, Alan R. Liss, p. 77 (1985) and Boerner et al., J. Immunol., 147(1):86-95 (1991)].

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The present invention also envisages enhancing a therapeutic efficacy of a therapeutic agent.

As used herein a "therapeutic agent" refers to a polynucleotide, a polypeptide or a small molecule, which targets a gene product of interest to induce a therapeutic effect in a subject.

Therapeutic agents (drugs), which are used to treat diseases or disorders function through one of several mechanisms. Typically, therapeutic agents target one or more endogenous molecules to exert a negative or positive effect thereupon. The following section describes several therapeutic modalities in which use of naturally occurring antisense transcripts in combination with the therapeutic agent is advantageous.

In cases where the gene product targeted is suppressed or eliminated by the therapeutic agent [e.g., a soluble receptor (i.e., therapeutic agent) which is capable of downregulating an activity of an oncogenic receptor (i.e., target)], the effect of the therapeutic agent can be enhanced by providing to a subject in need thereof a naturally occurring antisense transcript of the gene encoding the expression product targeted by the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent. Such combination therapy can be utilized to suppress the gene target at both the translational and functional level thus substantially enhancing therapeutic efficacy. Methods of administration are further described hereinbelow.

Alternatively, the subject may be provided with a naturally occurring antisense transcript of a gene which encodes an expression product capable of inhibiting activity or expression of the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent. For example, any of the sequences shown in Table

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9 below, which are of proteins that are involved in drug-drug interactions, may be suitable for selection in this regard. A non-limiting example of such a sequence has the name (gene symbol) "ABCB9". If such a protein was shown to be involved in an interaction which would reduce the efficacy of a therapeutic agent, then the naturally occurring antisense transcript of the corresponding gene could optionally be provided as an adjunct therapy, by being provided to the subject prior to, concomitant with, or following provision of the therapeutic agent.

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Still alternatively, the subject may be provided with an inhibitor [e.g., oligonucleotide, small molecule, antibody) of a naturally occurring antisense transcript of a gene which encodes an expression product capable of upregulating activity or expression of the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent. For example, see Example 12 of the Examples section which follows. In this case the naturally occurring antisense transcript performs a dual function, by both downregulating activity of the therapeutic agent at the transcript level and inhibiting activity at the protein level.

Still alternatively, in cases where a therapeutic agent functions by activating an endogenous molecule such as a cell receptor (e.g., VEGF-R); it may be beneficial to upregulate expression or activity of a naturally occurring antisense transcript of an endogenous non-functional form of this receptor (e.g., soluble VEGF-R). Since the non-functional form of the receptor may be capable of competing for the therapeutic agent and thus masking or eliminating its effect on the cell bound (wt) form of the receptor, provision of a naturally occurring antisense transcript of the non-functional form of the target gene can either increase the beneficial effect of the therapeutic agent and/or reduce the amount of therapeutic agent used in treatment.

The oligonucleotides and polynucleotides of the present invention can be used for therapeutic purposes. For example, oligonucleotides of the present invention can be used to treat a variety of diseases or pathological conditions associated with an abnormal expression (i.e., up-regulation or down-regulation) of at least one mRNA molecule of interest, including but not limited to diabetes, autoimmune diseases, Parkinson, Alzheimer' disease, HTV, malaria, cholera, influenza, rabies, diphtheria, breast cancer, colon cancer, cervical cancer, melanoma, lung cancer, ovarian cancer, pancreatic cancer, prostate cancer, lymphomas, leukemias and the like and any other

diseases (see Example 8 of the Examples section) which are associated with aberrant expression of multiple mRNAs (i.e., sense and/or antisense) or with unregulated formation of endogenous double stranded RNA complexes.

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Furthermore, accumulated knowledge strongly correlates human diseases with mutations, over-expression and function of the protein building blocks (i.e., protein kinases, phosphatsases) and their effectors and regulators, which constitute numerous intracellular signaling pathways. For instance, inactivation of both copies of ZAP-70 or Jak-3 causes severe combined immunodeficiency and mutation of the X-linked BTK gene results in agammaglobulinemia. Many genetic disorders are also associated with mutations for example, in protein-serine kinases (PSKs) and phosphatases. The Coffin-Lowry syndrome results from inactivation of the X-linked Rsk2 gene, and myotonic dystrophy is due to decreased levels of expression of the myotonic dystrophy PSK. In addition, over-expression of ErbB2 receptor tyrosine kinase is implicated in breast and ovarian carcinoma [reviewed by Hunter T. (2000) Cell 100:113-127].

Given the importance of activated kinases in a variety of disorders such as cancer, it would be anticipated that phosphatases regulation would be found as tumor suppressor genes and as promising drug targets. So far this has not proved to be the case. Furthermore, a number of diseases are associated with insufficient expression of signaling molecules, including non-insulin-dependent diabetes and peripheral neuropathies.

Thus, it is conceivable that identification of naturally occurring antisense transcripts of signaling molecules participating in specified signaling pathways may serve as promising tools for both identification and particularly treatment of a variety of disorders at any gene expression level (i.e., RNA, DNA or protein).

The term "treating" refers to alleviating or diminishing a symptom associated with the disease or the condition and/or eliminating the cause of the disease or condition. Preferably, treating cures, e.g., substantially eliminates, and/or substantially decreases, the symptoms and/or cause of the disease or condition.

The treatment method according to the teachings of the present invention includes administering to an individual a therapeutically effective amount of the oligonucleotides, polynucleotides or other agents of the present invention. Preferred

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individual subjects according to the present invention are mammals such as canines, felines, ovines, porcines, equines, bovines, humans and the like.

A therapeutically effective amount implies an amount of agent effective to prevent, alleviate or ameliorate symptoms of disease or prolong the survival of the individual being treated

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The agent of the method of the present invention can be administered to an individual *per se*, or as part of a pharmaceutical composition where it is mixed with a pharmaceutically acceptable carrier.

As used herein a "pharmaceutical composition" refers to a composition of one or more of the agents described hereinabove, or physiologically acceptable salts or prodrugs thereof, with other chemical components. The purpose of a pharmaceutical composition is to facilitate administration of a compound to an organism.

The pharmaceutical compositions of the present invention may be administered in a number of ways depending upon whether local or systemic treatment is desired and upon the area to be treated. Administration may be topical (including ophthalmic and to mucous membranes including vaginal and rectal delivery), pulmonary, e.g., by inhalation or insufflation of powders or aerosols, including by nebulizer; intratracheal, intranasal, epidermal and transdermal), oral or parenteral. Parenteral administration includes intravenous, intraarterial, subcutaneous, intraperitoneal or intramuscular injection or infusion; or intracranial, e.g., intrathecal or intraventricular, administration. Oligonucleotides with at least one 2'-Omethoxyethyl modification are believed to be particularly useful for oral administration.

Pharmaceutical compositions and formulations for topical administration may include transdermal patches, ointments, lotions, creams, gels, drops, suppositories, sprays, liquids and powders. Conventional pharmaceutical carriers, aqueous, powder or oily bases, thickeners and the like may be necessary or desirable. Coated condoms, gloves and the like may also be useful.

Compositions and formulations for oral administration include powders or granules, suspensions or solutions in water or non-aqueous media, capsules, sachets or tablets. Thickeners, flavoring agents, diluents, emulsifiers, dispersing aids or binders may be desirable.

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Compositions and formulations for parenteral, intrathecal or intraventricular administration may include sterile aqueous solutions which may also contain buffers, diluents and other suitable additives such as, but not limited to, penetration enhancers, carrier compounds and other pharmaceutically acceptable carriers or excipients.

Pharmaceutical compositions of the present invention include, but are not limited to, solutions, emulsions, and liposome-containing formulations. These compositions may be generated from a variety of components that include, but are not limited to, preformed liquids, self-emulsifying solids and self-emulsifying semisolids.

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The pharmaceutical formulations of the present invention, which may conveniently be presented in unit dosage form, may be prepared according to conventional techniques well known in the pharmaceutical industry. Such techniques include the step of bringing into association the active ingredients with the pharmaceutical carrier(s) or excipient(s). In general the formulations are prepared by uniformly and intimately bringing into association the active ingredients with liquid carriers or finely divided solid carriers or both, and then, if necessary, shaping the product.

The compositions of the present invention may be formulated into any of many possible dosage forms such as, but not limited to, tablets, capsules, liquid syrups, soft gels, suppositories, and enemas. The compositions of the present invention may also be formulated as suspensions in aqueous, non-aqueous or mixed media. Aqueous suspensions may further contain substances which increase the viscosity of the suspension including, for example, sodium carboxymethylcellulose, sorbitol and/or dextran. The suspension may also contain stabilizers.

In one embodiment of the present invention the pharmaceutical compositions may be formulated and used as foams. Pharmaceutical foams include formulations such as, but not limited to, emulsions, microemulsions, creams, jellies and liposomes. While basically similar in nature these formulations vary in the components and the consistency of the final product. The preparation of such compositions and formulations is generally known to those skilled in the pharmaceutical and formulation arts and may be applied to the formulation of the compositions of the present invention.

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The pharmaceutical compositions of the present invention may employ various penetration enhancers to effect the efficient delivery of nucleic acids, particularly oligonucleotides, to the skin of animals.

Penetration enhancers may be classified as belonging to one of five broad categories, i.e., surfactants, fatty acids, bile salts, chelating agents, and non-chelating non-surfactants [Lee et al., Critical Reviews in Therapeutic Drug Carrier Systems (1991) 92] as disclosed in U.S. Pat. No: 6,300,132, 6,271,030, 6,277,633, 6,284,538, 6,287,860, 6,294,382, 6,277,640 and 6,258,601 each of which is herein fully incorporated by reference.

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Other substances that enhance uptake of oligonucleotides at the cellular level may also be added to the pharmaceutical compositions of the present invention. For example, cationic lipids, such as lipofectin [U.S. Pat. No. 5,705,188], cationic glycerol derivatives, and polycationic molecules, such as polylysine [PCT Application WO 97/30731], are also known to enhance the cellular uptake of oligonucleotides.

Other reagents may be utilized to enhance the penetration of the administered nucleic acids, including glycols such as ethylene glycol and propylene glycol, pyrrols such as 2-pyrrol, azones, and terpenes such as limonene and menthone.

Certain pharmaceutical compositions of the present invention may also incorporate carrier compounds. As used herein, "carrier compound" or "carrier" can refer to a nucleic acid, or analog thereof, which is inert (i.e., does not possess biological activity per se) but is recognized as a nucleic acid by in vivo processes that reduce the bioavailability of a nucleic acid having biological activity by, for example, degrading the biologically active nucleic acid or promoting its removal from circulation. The co-administration of a nucleic acid and a carrier compound, typically with an excess of the latter substance, can result in a substantial reduction of the amount of nucleic acid recovered in the liver, kidney or other extracirculatory reservoirs, presumably due to competition between the carrier compound and the nucleic acid for a common receptor. For example, the recovery of a partially phosphorothioate oligonucleotide in hepatic tissue can be reduced when it is coadministered with polyinosinic acid, dextran sulfate, polycytidic acid or 4-acetamido-4' isothiocyano-stilbene-2,2'-disulfonic acid [Miyao et al., Antisense Res.

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Dev., (1995) 5:115-121; Takakura et al., Antisense & Nucl. Acid Drug Dev. (1996) 6:177-183].

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In contrast to a carrier compound, an "excipient" is a pharmaceutically acceptable solvent, suspending agent or any other pharmacologically inert vehicle for delivering one or more nucleic acids to an animal. The excipient may be liquid or solid and is selected, with the planned manner of administration in mind, so as to provide for the desired bulk, consistency, etc., when combined with a nucleic acid and the other components of a given pharmaceutical composition. Typical excipients include, but are not limited to, binding agents (e.g., pregelatinized maize starch, polyvinylpyrrolidone or hydroxypropyl methylcellulose, etc.); fillers (e.g., lactose and other sugars, microcrystalline cellulose, pectin, gelatin, calcium sulfate, ethyl cellulose, polyacrylates or calcium hydrogen phosphate, etc.); lubricants (e.g., magnesium stearate, talc, silica, colloidal silicon dioxide, stearic acid, metallic stearates, hydrogenated vegetable oils, corn starch, polyethylene glycols, sodium benzoate, sodium acetate, etc.); disintegrants (e.g., starch, sodium starch glycolate, etc.); and wetting agents (e.g., sodium lauryl sulphate, etc.).

Pharmaceutically acceptable organic or inorganic excipient suitable for non-parenteral administration which do not deleteriously react with nucleic acids can also be used to formulate the compositions of the present invention. Suitable pharmaceutically acceptable carriers include, but are not limited to, water, salt solutions, alcohols, polyethylene glycols, gelatin, lactose, amylose, magnesium stearate, talc, silicic acid, viscous paraffin, hydroxymethylcellulose, polyvinylpyrrolidone and the like.

Formulations for topical administration of nucleic acids may include sterile and non-sterile aqueous solutions, non-aqueous solutions in common solvents such as alcohols, or solutions of the nucleic acids in liquid or solid oil bases. The solutions may also contain buffers, diluents and other suitable additives. Pharmaceutically acceptable organic or inorganic excipients suitable for non-parenteral administration, which do not deleteriously react with nucleic acids can be used.

Suitable pharmaceutically acceptable excipients include, but are not limited to, water, salt solutions, alcohol, polyethylene glycols, gelatin, lactose, amylose,

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magnesium stearate, talc, silicic acid, viscous paraffin, hydroxymethylcellulose, polyvinylpyrrolidone and the like.

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The compositions of the present invention may additionally contain other adjunct components conventionally found in pharmaceutical compositions, at their art-established usage levels. Thus, for example, the compositions may contain additional, compatible, pharmaceutically-active materials such as, for example, antiprurities, astringents, local anesthetics or anti-inflammatory agents, or may contain additional materials useful in physically formulating various dosage forms of the compositions of the present invention, such as dyes, flavoring agents, preservatives, antioxidants, opacifiers, thickening agents and stabilizers. However, such materials, when added, should not unduly interfere with the biological activities of the components of the compositions of the present invention. The formulations can be sterilized and, if desired, mixed with auxiliary agents, e.g., lubricants, preservatives, stabilizers, wetting agents, emulsifiers, salts for influencing osmotic pressure, buffers, colorings, flavorings and/or aromatic substances and the like which do not deleteriously interact with the nucleic acid(s) of the formulation. Aqueous suspensions may contain substances which increase the viscosity of the suspension including, for example, sodium carboxymethylcellulose, sorbitol and/or dextran. The suspension may also contain stabilizers.

The formulation of therapeutic compositions and their subsequent administration is believed to be within the skill of those in the art. Dosing is dependent on severity and responsiveness of the disease state to be treated, with the course of treatment lasting from several days to several months, or until a cure is effected or a diminution of the disease state is achieved. Optimal dosing schedules can be calculated from measurements of drug accumulation in the body of the patient. Persons of ordinary skill can easily determine optimum dosages, dosing methodologies and repetition rates. Optimum dosages may vary depending on the relative potency of individual oligonucleotides, and can generally be estimated based on EC50 found to be effective in in vitro and in vivo animal models. Persons of ordinary skill in the art can easily estimate dosing and repetition rates based on measured residence times and concentrations of the oligonucleotide in bodily fluids or tissues. Following successful treatment, it may be desirable to have the patient

undergo maintenance therapy to prevent the recurrence of the disease state, wherein the oligonucleotide is administered in maintenance doses.

As mentioned hereinabove, biomolecular sequences of the present invention can also be used in diagnostic applications. Present-day mRNA-based diagnostic assays utilize oligonucleotide probes which are complementary to one or more regions of the mRNA to be qualified or quantified. Such probes are designed while considering interspecies sequence variation, sequence length, GC content etc. However design of such prior art probes (i.e., riboprobes or deoxyriboprobes) does not take into consideration the presence of antisense transcripts which can effect probe binding efficiency. Discounting antisense presence can lead to inaccurate qualification/quantification and thus diagnosis, and thus lead to erroneous treatment protocols.

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The present invention provides an mRNA-detection/quantification assay, which is devoid of this limitation.

Thus, according to an additional aspect of the present invention there is provided a method of quantifying at least one mRNA of interest in a biological sample.

As used herein, the phrase "biological sample" refers to any sample derived from biological tissues or fluids, including blood (serum or plasma), sputum, pleural effusions, urine, biopsy specimens, isolated cells and/or cell membrane preparation. Methods of obtaining tissue biopsies and body fluids from mammals are well known in the art.

The method of this aspect of the present invention is effected by contacting mRNA from a cell type or within a cell with one or more oligonucleotides that hybridizes efficiently with a sequence region of an mRNA transcript which is not complementary with a naturally occurring antisense transcript.

In addition to the limitation described above, prior art diagnostic/detection assays also fail to consider the effect of antisense transcription on the protein expression levels of a gene of interest. It stands to reason that presence of antisense transcripts in a biological sample can substantially reduce the resultant protein levels translated from a complementary sense transcript. Consistently, diseases which are associated with endogenous dsRNA complexes, are also very difficult to detect and

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moreover to treat, due to insufficient sequence data pertaining to duplex forming transcripts.

Thus, for accurate quantification of gene expression, both the sense and antisense levels must be quantified and/or their respective expression ratio must be determined.

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By contacting a biological sample with one or more pairs of oligonucleotides, where one oligonucleotide is capable of hybridizing with the mRNA of interest and the second oligonucleotide is capable of hybridizing with a naturally occurring antisense transcript which is complementary with the mRNA of interest such accurate quantification can be effected.

Contacting the oligonucleotides of the present invention with the biological sample is effected by stringent, moderate or mild hybridization (as used in any polynucleotide hybridization assay such as northern blot, dot blot, RNase protection assay, RT-PCR and the like). Wherein stringent hybridization is effected by a hybridization solution of 6 x SSC and 1 % SDS or 3 M TMACI, 0.01 M sodium phosphate (pH 6.8), 1 mM EDTA (pH 7.6), 0.5 % SDS, 100 mg/ml denatured salmon sperm DNA and 0.1 % nonfat dried milk, hybridization temperature of 1 - 1.5 °C below the Tm, final wash solution of 3 M TMACI, 0.01 M sodium phosphate (pH 6.8), 1 mM EDTA (pH 7.6), 0.5 % SDS at 1 - 1.5 °C below the Tm; moderate hybridization is effected by a hybridization solution of 6 x SSC and 0.1 % SDS or 3 M TMACI, 0.01 M sodium phosphate (pH 6.8), 1 mM EDTA (pH 7.6), 0.5 % SDS, 100 mg/ml denatured salmon sperm DNA and 0.1 % nonfat dried milk, hybridization temperature of 2 - 2.5 °C below the Tm, final wash solution of 3 M TMACI, 0.01 M sodium phosphate (pH 6.8), 1 mM EDTA (pH 7.6), 0.5 % SDS at 1 - 1.5 °C below the Tm, final wash solution of 6 x SSC, and final wash at 22 °C; whereas mild hybridization is effected by a hybridization solution of 6 x SSC and 1 % SDS or 3 M TMACI, 0.01 M sodium phosphate (pH 6.8), 1 mM EDTA (pH 7.6), 0.5 % SDS, 100 mg/ml denatured salmon sperm DNA and 0.1 % nonfat dried milk, hybridization temperature of 37 °C, final wash solution of 6 x SSC and final wash at 22 °C.

The oligonucleotides of the present invention can be attached to a solid substrate, which may consist of a particulate solid phase such as nylon filters, glass slides or silicon chips [Schena et al. (1995) Science 270:467-470].

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In a particular embodiment, oligonucleotides of the present invention can be attached to a solid substrate, which is designed as a microarray. Microarrays are known in the art and consist of a surface to which probes that correspond in sequence to gene products (e.g., cDNAs, mRNAs, cRNAs, polypeptides, and fragments thereof), can be specifically hybridized or bound at a known position (regiospecificity).

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Several methods for attaching the oligonucleotides to a microarray are known in the art including but not limited to glass-printing, described generally by Schena et al., 1995, Science 270:467-47, photolithographic techniques [Fodor et al. (1991) Science 251:767-773], inkjet printing, masking and the like.

In general, quantifying hybridization complexes is well known in the art and may be achieved by any one of several approaches. These approaches are generally based on the detection of a label or marker, such as any radioactive, fluorescent, biological or enzymatic tags or labels of standard use in the art. A label can be applied on either the oligonucleotide probes or nucleic acids derived from the biological sample.

The following illustrates a number of labeling methods suitable for use in the present invention. For example, oligonucleotides of the present invention can be labeled subsequent to synthesis, by incorporating biotinylated dNTPs or rNTP, or some similar means (e.g., photo-cross-linking a psoralen derivative of biotin to RNAs), followed by addition of labeled streptavidin (e.g., phycoerythrin-conjugated Alternatively, when fluorescently-labeled streptavidin) or the equivalent. oligonucleotide probes are used, fluorescein, lissamine, phycoerythrin, rhodamine (Perkin Elmer Cetus), Cy2, Cy3, Cy3.5, Cy5, Cy5.5, Cy7, FluorX (Amersham) and others [e.g., Kricka et al. (1992), Academic Press San Diego, Calif] can be attached to the oligonucleotides. It will be appreciated that pairs of fluorophores are chosen when distinction between two emission spectra of two oligonucleotides is desired or optionally, a label other than a fluorescent label is used. For example, a radioactive label, or a pair of radioactive labels with distinct emission spectra, can be used [Zhao et al. (1995) Gene 156:207]. However, because of scattering of radioactive particles, and the consequent requirement for widely spaced binding sites, the use of fluorophores rather than radioisotopes is more preferred.

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The intensity of signal produced in any of the detection methods described hereinabove may be analyzed manually or using a software application and hardware suited for such purposes.

In general, mRNA quantification is preferably effected alongside a calibration curve so as to enable accurate mRNA determination. Furthermore, quantifying transcript(s) originating from a biological sample is preferably effected by comparison to a normal sample, which sample is characterized by normal expression pattern of the examined transcript(s).

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It will be appreciated that the detection method described above can also be used for quantifying at least one naturally occurring antisense transcript in a biological sample. In such a case, the oligonucleotide used for quantification is designed to hybridize with a sequence region of naturally occurring antisense transcript of interest, which is not complementary with a naturally occurring mRNA transcript.

The diagnostic assays described hereinabove can be used to accurately distinguish between absence, presence and excess expression of any transcripts of interest (e.g., sense, antisense), and to monitor their level during therapeutic intervention. These methods are also capable of diagnosing diseases associated with an improper balance or ratio between sense and antisense expression and diseases associated with endogenous dsRNA.

Further description of oligonucleotide-pair arrays is provided in Example 9 of the Examples section which follows.

As discussed hereinabove oligonucleotides of the present invention can be also used for therapeutic purposes, such as treating diseases or conditions associated with aberrant expression levels of one or more sense and/or antisense transcripts and conditions, which are associated with endogenous dsRNA such as unregulated formation of double-strand RNA (i.e., up/down-regulation).

The oligonucleotides generated according to the teachings of the present invention can be included in a diagnostic or therapeutic kit. For example, oligonucleotides sets pertaining to specific disease related transcripts can be packaged in a one or more containers with appropriate buffers and preservatives along with

suitable instructions for use and used for diagnosis or for directing therapeutic treatment.

Preferably, the containers include a label. Suitable containers include, for example, bottles, vials, syringes, and test tubes. The containers may be formed from a variety of materials such as glass or plastic.

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In addition, other additives such as stabilizers, buffers, blockers and the like may also be added.

Apart from clinical applications, the biomolecular sequences of the present invention can find other commercial uses such as in the food, agricultural, electromechanical, optical and cosmetic industries [www.physics.unc.edu/~rsuper/XYZweb/XYZchipbiomotors.rs1.doc; www.bio.org/er/industrial.asp]. For example, newly uncovered gene products, which can disintegrate connective tissues, can be used as potent anti scarring agents for cosmetic purposes. Non-limiting examples of such gene products include the matrix metalloproteinase family of proteins (MMP), which are a group of proteases having varying specificities for ECM components as substrates, non-limiting examples of which have the gene symbols "CLG" and "CGL4B" in the attached files. These proteins are involved in ECM break-down as part of the wound healing process, for example for cell migration. The activity of these proteins is also modulated by specific tissue inhibitors of MMPs (TIMP) and other factors in the microenvironment in and around the wound area. Therefore, one possible optionally application for the present invention would be the selection of appropriate antisense oligonucleotides for either one or more MMPs and /or for factors related to TIMPs, in order to modulate wound healing activities (and/or as previously noted, for treatment of arthritis).

As another optional treatment, production of collagen may be optionally modulated through the use of appropriate antisense oligonucleotides. Collagen is an important connective tissue element, but is also involved in pathological conditions such as fibrosis and the formation of adhesions between tissues of different organs, a condition which may occur for example after surgery. Therefore, modulation of collagen production, for example to reduce collagen production, may optionally be performed according to the present invention.

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Other applications include, but are not limited to, the making of gels, emulsions, foams and various specific products, including photographic films, tissue replacers and adhesives, food and animal feed, detergents, textiles, paper and pulp, and chemicals manufacturing (commodity and fine, e.g., bioplastics).

Research applications include, for example, differential cloning, detection of rearrangements in DNA sequences as disclosed in U.S. Pat. No: 5,994,320, drug discovery and the like.

As used herein the term "about" refers to  $\pm$  10 %.

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Additional objects, advantages, and novel features of the present invention will become apparent to one ordinarily skilled in the art upon examination of the following examples, which are not intended to be limiting. Additionally, each of the various embodiments and aspects of the present invention as delineated hereinabove and as claimed in the claims section below finds experimental support in the following examples.

#### **EXAMPLES**

Reference is now made to the following examples, which together with the above descriptions, illustrate the invention in a non limiting fashion.

Generally, the nomenclature used herein and the laboratory procedures utilized in the present invention include molecular, biochemical, microbiological and recombinant DNA techniques. Such techniques are thoroughly explained in the literature. See, for example, "Molecular Cloning: A laboratory Manual" Sambrook et al., (1989); "Current Protocols in Molecular Biology" Volumes I-III Ausubel, R. M., ed. (1994); Ausubel et al., "Current Protocols in Molecular Biology", John Wiley and Sons, Baltimore, Maryland (1989); Perbal, "A Practical Guide to Molecular Cloning", John Wiley & Sons, New York (1988); Watson et al., "Recombinant DNA", Scientific American Books, New York; Birren et al. (eds) "Genome Analysis: A Laboratory Manual Series", Vols. 1-4, Cold Spring Harbor Laboratory Press, New York (1998); methodologies as set forth in U.S. Pat. Nos. 4,666,828; 4,683,202; 4,801,531; 5,192,659 and 5,272,057; "Cell Biology: A Laboratory Handbook", Volumes I-III

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Cellis, J. E., ed. (1994); "Current Protocols in Immunology" Volumes I-III Coligan J. E., ed. (1994); Stites et al. (eds), "Basic and Clinical Immunology" (8th Edition), Appleton & Lange, Norwalk, CT (1994); Mishell and Shiigi (eds), "Selected Methods in Cellular Immunology", W. H. Freeman and Co., New York (1980); available immunoassays are extensively described in the patent and scientific literature, see, for example, U.S. Pat. Nos. 3,791,932; 3,839,153; 3,850,752; 3,850,578; 3,853,987; 3,867,517; 3,879,262; 3,901,654; 3,935,074; 3,984,533; 3,996,345; 4,034,074; 4,098,876; 4,879,219; 5,011,771 and 5,281,521; "Oligonucleotide Synthesis" Gait, M. J., ed. (1984); "Nucleic Acid Hybridization" Hames, B. D., and Higgins S. J., eds. (1985); "Transcription and Translation" Hames, B. D., and Higgins S. J., eds. (1984); "Animal Cell Culture" Freshney, R. I., ed. (1986); "Immobilized Cells and Enzymes" IRL Press, (1986); "A Practical Guide to Molecular Cloning" Perbal, B., (1984) and "Methods in Enzymology" Vol. 1-317, Academic Press; "PCR Protocols: A Guide To Methods And Applications", Academic Press, San Diego, CA (1990); Marshak et al., "Strategies for Protein Purification and Characterization - A Laboratory Course Manual" CSHL Press (1996); all of which are incorporated by reference as if fully set forth herein. Other general references are provided throughout this document. The procedures therein are believed to be well known in the art and are provided for the convenience of the reader. All the information contained therein is incorporated herein by reference.

# In-vitro expression substantiation of computationally retrieved naturally occurring antisense transcripts

*In-vitro* expression assays were conducted in order to validate the existence of naturally occurring antisense sequences identified according to the teachings of the present invention.

Table 1 below lists polynucleotide sequence pairs that were selected for the *invitro* expression validation assays described in examples 1-7.

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Name of sense	Sense	Sense	Antisense	Anti-	Overlap	Start of	Start of
antisense pair	transcript	Length	transcript	sense	length	overlap	overlap
<del></del>		(nt)		Length	(nt)	sense	anti-
<del></del>				(nt)		transcript	sense
	t .	1 1		l l		I	I

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53BP1_76P	53BP1	10394	76P	6837	3046	5463	2018
	(SEQ ID NO: 15)		(SEQ ID NO: 16)				
CIDEB_BLTR2(1)	CIDEB1	2289	BLTR2	6530	2254	17	1
	(SEQ ID NO: 19)		(SEQ ID NO: 21)				
CIDEB_BLTR2 (2)	CIDEB2	1511	BLTR2	6530	1410	1	1
	(SEQ ID NO: 20)						
APAF1_BB1	aAPAF1	7042	EBla	1752	141	6889	1612
	(SEQ ID NO: 24)		(SEQ ID NO: 25)				
AChR_MINK2	AchR	2457	MINK2	4863	236	2175	4853
	(SEQ ID NO: 29)		(SEQ ID NO: 30)				
M-AchR_Anti-AChR	M-AchR	1590	M-Anti-AchR	2227	672	934	506
	(SEQ ID NO: 35)		(SEQ ID NO: 36)				
CyclinE2_Anti-CyclinE2	CyclinE2	2714	Anti-CyclinE2	5773	1855	565	2006
	(SEQ ID NO: 33)		(SEQ ID NO: 34)				

Sequence alignments of overlapping regions of each sense-antisense pair were performed using the BLAST sequence alignment algorithm (Basic Local Alignment Search Tool, available through www.ncbi.nlm.nih.gov/BLAST using the default parameters) and are exhibited in Figure 5a-g.

A microarray-based analysis was conducted, as well, in order to validate the existence of naturally occurring, antisense sequences identified according to the teachings of the present invention. The results are described in Example 9.

#### Materials and Experimental Methods

# RNA probes generation and northern analysis

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RNA probes for northern analysis were generated by PCR amplification of a desired DNA fragment and cloning into Zero Blunt TOPO (Invitrogen Corp.) or pSPT18/19 vectors (Roche Ltd.). Alternatively PCR products were ligated into T7 RNA polymerase promoter-containing adaptors using the Lignscribe kit (Ambion Europe Ltd.). Corresponding RNA transcripts were synthesized using T7 RNA polymerase (Roche Ltd.) and labeled with 32P-UTP according to manufacturer's instructions. RNA probes were purified on Mini Quick Spin RNA columns.

Commercial membranes containing Poly(A)-RNA from various human tissues (2 µg RNA per lane) were obtained from Origene (OriGene Technologies Inc.) and Ambion (Ambion Inc.).

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Alternatively, 2 µg of poly(A)-RNA prepared from various human cell-lines were electrophoretically separated on 1 % agarose gel, and electrotransferred to Nytran SuperCharge membrane (Schleicher & Schuell ) and subjected to fixing by UV radiation. Membranes were stained with methylene blue to ensure quantitative RNA transfer. Membranes were then prehybridized in a hybridization solution (UltraHyb solution Ambion Europe Ltd.) for 30 minutes at 68 °C in a rotating hybridization tube.

Hybridization solution was then supplemented with 106 cpm of labeled RNA probe per each ml of hybridization solution. Blots were hybridized for 16 hours at 68 °C in a rotating hybridization tube. Membranes were then washed twice with 2 x SSC, 0.1 % sodium dodecyl sulfate (SDS) and twice with 0.1 % SDS at 68 °C. RNA transcripts signals were detected using a phosphoimager (Molecular Dynamics, Sunnyvale CA).

### Microarray

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Oligonucleotide design - oligonucleotide design tools (1) were applied to each pair of sense/antisense genes in order to select two complementary 60-mer oligonucleotides from the region where the two genes overlap. The design criteria included the following: low cross-homology (up to 75%) to other expressed sequences in the human transcriptome; a continuous hit of no more than 17 bp to the sequence of another gene; balanced GC content (30-70%) without significant windows of local imbalance; no more than 2 palindromes with a length of 6 bp; a hit of no more than 15 bp to a repeat, vector or low-complexity region; and no long stretches of identical nucleotides.

Microarray preparation - 60-mer oligonucleotides were synthesized by Sigma-Genosys (The Woodlands, TX), resuspended at 40 μM in 3X SSC, and spotted in quadruplicates on poly-L-lysine coated glass slides as detailed in the online protocol of the National Human Genome Research Institute (http://www.nhgri.nih.gov/DIR/Microarray/Protocols.pdf). To avoid local differences in the hybridization conditions, the probes selected from the overlapping regions of each sense/antisense pair were spotted in the same block, next to each other.

Human cell lines - The following cell lines utilized were purchased from ATCC (Manassas, VA): MCF7 (breast adenocarcinoma, Cat. No. HTB-22,), HeLa

(cervical adenocarcinoma, Cat. No. CCL-2) HEK-293 (embryonal kidney cells, Cat. No. CRL-1573), Jurkat (acute T-cell leukemia, Cat. No. TIB-152), K-562 (chronic myelogenous leukemia, Cat. No. CCL-243), HepG2 (liver carcinoma, Cat. No. HB-8065), T24 (urinary bladder carcinoma, Cat. No. HTB-4), SK-N-DZ (neuroblastoma, Cat. No. CRL-2149), NK-92 (non-Hodgkin's lymphoma, Cat. No. CRL-2407), MG-63 (osteosarcoma, Cat. No. CRL-1427), DU 145 (prostatic carcinoma, Cat. No. HTB-81), G-361 (melanoma, Cat. No. CRL-1424), PANC-1 (pancreatic carcinoma, Cat. No. CRL-1469), ES-2 (ovary clear cell carcinoma, Cat. No. CRL-1978), Y79 (retinoblastoma, Cat. No. HTB-18), HT-29 (colorectal adenocarcinoma, Cat. No. HTB-38), H1299 (large cell lung carcinoma, Cat. No. CRL-5803), SNU1 (gastric carcinoma, Cat. No. CRL-5971), NL564 (EBV-transformed human lymphoblasts) and MCF10 (benign tumor breast cells).

RNA purification - Total RNA was extracted from the above mentioned human cell lines using TriReagent (Molecular Research Center, Cincinnati, OH). Poly(A)+ mRNA was purified using two cycles of the Dynabeads mRNA Purification Kit (Dynal Biotech ASA, Oslo, Norway), as per manufacturer instructions. The removal of traces of ribosomal RNA was confirmed by agarose gel electrophoresis. Poly(A)+ mRNAs from human testis, placenta, lung and brain tissue were purchased from BioChain Institute, Inc. (Hayward, CA). mRNAs of all cell lines described above were combined in equal quantities to obtain the reference 'mRNA pool'.

Preparation of labeled cDNA - For each hybridization, labeled cDNA was synthesized by reverse transcription of 0.5 μg of mRNA, in the presence of 100 pmol of random 9-mers, 1μg of oligo(dT)20, 1X RT buffer, 10 mM DTT, 3 nmol of Cy5- or Cy3-conjugated dUTP, 0.5 mM of dATP, dGTP and dCTP, and 0.2 mM dTTP, in a final volume of 40 μl (Amersham). The reaction mixture was incubated for 5 minutes at 65 °C and cooled to 42 °C. 600 Units of reverse transcriptase (Superscript II, Invitrogen, Carlsbad, CA) and 40 U of Rnase inhibitor (RNasin Promega, Madison, WI) were added and the reaction was incubated for 30 minutes at 42 °C. An additional 200 U of Superscript II were added and the reaction was incubated for another 15 minutes. Remaining RNA was degraded by the addition of 200 mM NaOH and 50 mM EDTA, at 65 °C for 10 minutes. The mixture was neutralized by adding half a volume of 1M Tris-HCl pH 7.5. Hybridizations were performed in

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duplicate using fluorescent reversal of Cy3- and Cy5-labeled cDNA from test cell mRNAs and pooled mRNAs. Pairs of Cy5/Cy3-labeled cDNA samples were combined, and subsequently purified and concentrated to a final volume of 5-7  $\mu$ l using a Microcon-30 (Millipore) concentrator.

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Hybridization and washing conditions - Microarray slides were prehybridized with 40 μl of 5X SSC, 0.1 % SDS and 1 % BSA for 30 min at 42 °C, washed for 2 minutes with double distilled water, then rinsed with isopropanol, and spun dried at 500 g for 3 minutes. Prior to hybridization, the labeled probe was combined with 10 μg of Cot-1 DNA, 10 μg poly(dA)80, and 4 μg yeast tRNA, in a final volume of 15 μl. The mixture was denatured at 100 °C for 3 minutes and placed on ice. Formamide (final concentration 16 %), SSC (to 5X concentration) and 0.1 % SDS were added to a final volume of 30 μl. The mixture was placed on the array under a glass cover slip in a tightly sealed hybridization chamber, and immersed in a water bath at 42 °C, for 16 hours. Microarray slides were then washed for 4 minutes with 2X SSC, 0.1 % SDS; 4 minutes with 1X SSC, 0.01 % SDS; 4 minutes with 0.2X SSC and 15 seconds with 0.05X SSC and spun dry by centrifugation for 3 minutes at 500g.

*Image processing* - Following hybridization, arrays were scanned using a GenePix 4000B scanner (Axon Instruments, Union City, CA). Scanned array images were manually inspected and areas with visible artifacts or deformities were marked. Images were processed using GenePix Pro 3.0 (www.axon.com) software.

**Normalization** - The intensity for each spot was calculated as its mean intensity minus the median background around the spot. The signal for each oligo was calculated as the average of intensity values of the four redundant spots of each oligo. Normalization of the oligo signals was performed at several levels as is further described below.

Normalization of blocks was carried out in order to normalize the gradient of intensities within each slide. For each block i, an Ai parameter was calculated as the average of intensities of 56 positive control spots (oligonucleotide probes for the ubiquitously expressed housekeeping genes gapdh, actin, hsp70 and gnb2l1, in various probe concentrations). An average A of all Ai averages was calculated. Based on this, a block normalization factor Bi was calculated for each block, as Bi = A/Ai, and applied to each spot in the block.

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Normalization between slides was performed to bring all experiments to the same scale. For each experiment, the average of intensities of the 192 negative control spots on the array was set to be the 0 (zero) of the new scale. For a subset of highly signaling oligos, with intensities between the 70th and the 95th percentiles of the oligo signal distribution of the experiment, the average was arbitrarily set to be 500 in the new scale. The intensity of each oligo signal was accordingly converted to this new scale, to obtain the normalized signal. A ratio between the normalized cell-line signal and the normalized pool signal was calculated for each oligo in each experiment. To avoid misleading ratios coming from signals that were too low, the ratio Rji for oligo j in experiment i was calculated as: Rji = max [100, cell-line-signalji]/max [100, pool-signalji].

To normalize between red/green intensities in reciprocal experiments, the ratio Rjk for oligo j in cell-line k was calculated as the average of calculated ratios Rji between the two reciprocal experiments of the cell-line k. In cases where only one of the two reciprocal experiments showed an elevated or decreased ratio, while in the other the ratio was 1.0, the average Rjk was converted to 1.0.

The actual pool signal for each oligo was calculated to be the average of the normalized oligo signals in the pool channel of all experiments. A virtual pool signal was calculated as the average of the normalized oligo signals in the cell-line channel of all experiments. The virtual pool signals were found to be very close to the actual pool signals, indicating consistency in the analysis.

Threshold determination - To determine an expression threshold above, in which a normalized signal would be considered a 'positive' signal indicating expression, the distribution of all 16,512 normalized negative control signals and the standard deviation (neg-std-dev) were calculated. The neg-std-dev obtained was 38. An oligo j was considered 'present' in a cell-line k if Rjk x actual-pool-signal  $\geq 4$  x neg-std-dev.

#### EXAMPLE 1

Identification of 53BP1 and 76P RNA transcripts in a variety of human tissues and cell-lines

Background:

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The tumor suppressor p53 binding protein 1 (SEQ ID NO: 15) is one of the various p53 target proteins. It binds to the DNA-binding domain of p53 and enhances p53-mediated transcriptional activation. 53BP1 is characterized by several structural motifs shared by several proteins involved in DNA repair and/or DNA damage-signaling pathways. 53BP1 becomes hyperphosphorylated and forms discrete nuclear foci in response to DNA damage induced by radiation and chemotherapy. Recent reports suggest that 53BP1 is an ataxia telangiectasia mutated (ATM) substrate that is involved early in the DNA damage-signaling pathways in mammalian cells, attributing a role to 53BP1 in the development of various mammalian pathologies.

#### Results:

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Two 53BP1 RNA sense transcripts with dissimilar 3' UTRs were previously described [Iwabuchi K. et al. (1994) Proc. Natl. Acad. Sci. USA] and are illustrated in Figure 6 (red and green). Leads assembly program modified to uncover novel antisense transcripts was used to uncover three such transcripts for the 53BP1 gene, which transcripts have different 3' UTRs (SEQ ID NO: 16, 37 and 38) and encode the 76p gene product (Genbank accession number NM014444)(illustrated in blue).

To confirm expression of computationally retrieved antisense transcripts, two RNA-probes were generated. Schematic location of the probes used for sense and antisense validation (Riboprobe#1 and Riboprobe#2, respectively SEQ ID NO: 17 and 18, respectively) is illustrated in Figure 6. These RNA probes were used to identify the corresponding full-length transcripts.

As shown in Figure 7, Riboprobe#1 detected two transcripts of approximately 6.3 Kb and 10.5 Kb, corresponding to the sense mRNA. The absolute levels of the short messenger were rather homogeneous in all cell-lines examined. The 10.5 Kb variant exhibited a more heterogenic pattern of cellular distribution, and was mostly expressed in K562, MG-63, 293 HEK and Hela cells. In general, the longer sense transcript which is an alternatively polyadenylated variant was markedly lower expressed in the various cell lines examined.

The same membrane was used to perform northern analysis with Riboprobe#2 in order to validate expression of antisense transcripts of 53BP1. Results are shown in Figure 8. Three variants corresponding to the 76p gene were detected in most of the cell lines: 6.8 Kb, 4.2 Kb and 2.5 Kb. Minor fluctuations of expression were

observed and the largest transcript was expressed at significantly higher levels than the smaller transcripts.

A sense strand probe was used to detect expression of the antisense transcripts in a variety of human tissues (Figure 9). The three alternatively polyadenylated variants with different 3' UTRs were expressed in most of the tissues. Total levels of these transcripts varied in the different tissues assayed. For example, highest level of expression for all three transcripts was observed in the brain and testis, while no expression of the 6.8 Kb and 4.2 Kb variants was detected in the spleen. Expression levels of each transcript were summarized in Table 2 below.

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Table 2

	Transcr	<del></del>		
Tissue	6.8	4.2	2.5	
brain	+++	++++	++++	
colon	+	++	+	
heart	-	+	++	
kidney	++	++	+	
Liver	-	-	+	
lung	++++	+++	+	
muscle	++	+	+	
placenta	+	++	++	
Small intestine.	++	++	-	
spleen	-	•	+	
stomach	-	-	+	
testis	++	++	1111	

Reverse transcription amplification (RT-PCR) analysis was performed in order to substantiate the northern blot results. Primers were synthesized according to the scheme shown in Figure 10 (indicated by arrows). The expected amplification products corresponded completely to the observed amplification reaction products, supporting the existence of the various 53BP1 and 76p transcription variants.

#### EXAMPLE 2

20 Identification of mRNA and complementary transcripts of the Cell death inducing DFF45-like effector (CIDE)-B

Background:

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Cell death inducing DFF45-like effector (CIDE-B) (GenBank Accession numbers AF190901 and AF218586) is a member of a novel family of apoptosis-inducing factors that share homology with the N-terminal region of DFF, the DNA fragmentation factor. Although the molecular mechanism of CIDE-B induced apoptosis in unclear, mitochondrial localization and dimerization, both where shown to be required [Chen Z. et al. (2000) J. Biol. Chem. 275:22619-22622]. Notably, over-expression of CIDE-B in mammalian cells shows strong cell death-inducing activity, suggesting that aberrant expression of this protein may be associated with a number of mammalian pathologies [Inohara N. et al. (1998) EMBO J. 17:2526-2533].

Results:

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Two sense transcript of the CIDE-B gene were previously described with different 5' UTRs [Inohara N. et al. (1998) EMBO J. 17:2526-2533 and Lugovskoy AA. et al. (1999) Cell 99:745-755] (SEQ ID NOs: 19 and 20). Computational analysis recovered a potential elongated BLTR2 transcript (SEQ ID NO: 21), showing full complementary to the CIDE-B mRNA transcripts (Figure 11).

Northern blot analysis was done in order to determine the distribution of the CIDE-B sense and antisense transcripts in various cell-lines. A 430 base pairs DNA fragment was selected to generate RNA probes for identification of both sense and antisense transcripts (SEQ ID NOs: 22 and 23, respectively).

Expression of antisense mRNA transcripts was detected in various cell-lines and especially in the mammary gland adenocarcinome cell line-MCF-7 as a predominant 6.5 Kb transcript, although higher forms were also visualized (Figure 12). Low hybridization with a CIDE-B probe was detected (Figure 13).

### Conclusion:

BLTR2 was recently identified as a putative seven-transmembrane receptor with a high homology to the Leukotriene B (4) receptor [Tryselius Y. et al. (2000) Biochem. Biophys. Res. Commun. 274:377-82]. Although the mechanism of action of BLTR2 is poorly understood, it is conceivable that BLTR2 mRNA plays a role in the regulation of CIDE-B apoptotic effector and vice versa.

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# Identification of mRNA and complementary transcripts of the apoptosis inducing factor APAF-1

## Background:

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A conserved series of events including cellular shrinkage, nuclear condensation, externalization of plasma membrane phosphatidyl serine, and oligonucleosomal DNA fragmentation characterizes apoptotic cell death. Regardless of the circumstance, induction and execution of apoptotic events require activation of caspases, a family of aspartate-specific cysteine proteinases. Caspase activation may be regulated by the mitochondrion and specifically by the apoptosome consisting of an oligomeric complex of apoptotic protease-activating factor-1 (APAF-1), cytochrome C and dATP. The apoptosome recruits and activates caspase-9, which in turn activates the executioner caspases, caspase-3 and -7. The active executioners kill the cell by proteolysis of key cellular substrates [Zou H. et al. (1999) J. Biol. Chem. 274:11549-11556]. Evasion or inactivation of the mitochondrial apoptosis pathway may contribute to oncogenesis by allowing cell proliferation. In this instance, unregulated cell proliferation may occur by inactivation of APAF-1, which has been suggested to occur via genetic loss or inhibition by HSP-70 and HSP-90. Although aberrant expression of APAF-1 was found in a variety of malignancies (including ovarian epithelial cancer), no link was found to accelerated protein degradation.

#### Results:

One RNA transcript has been previously described for APAF-1 [ Zou H. et al. (1999) J. Biol. Chem. 274:11549-11556] (SEQ ID NO: 10) (SEQ ID NO: 24). Computational search for natural antisense transcripts has revealed two complementary transcripts for APAF-1 messenger RNA (SEQ ID NOs: 25 and 26). These antisense transcripts include an open reading frame encoding the EB-1 gene (GenBank accession numbers AF145204; AF164792). The overlap between the APAF-1 messenger RNA and the longer antisense transcript is of at least 300 nucleotides.

To validate expression of computationally retrieved antisense transcripts for APAF-1, as well as expression of APAF-1 mRNA in the assayed human cell lines, RNA-probes of 366 ribonucleotides were generated (sense and antisense strands, respectively). Schematic location of the probes used for sense and antisense

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validation (Riboprobe#1 and Riboprobe#2, SEQ ID NOs: 27 and 28, respectively) is illustrated in Figure 14.

As shown in Figure 15a, the sense RNA probe directed at visualizing the antisense transcripts, identified a clear band of 3 Kb corresponding to the long computationally retrieved antisense transcript as well as other transcripts sizing from 1 Kb to 8 Kb (Figure 15a). Transcripts were essentially found in all cell lines but especially in 293 HEK and LN-Cap lines.

Hybridization with an RNA probe directed at visualizing the mRNA transcript of APAF-1 resulted only in a blurred patterns (Figure 15b). However, a 7 Kb mRNA transcript consistent with APAF-1mRNA was seen in Ln Cap and 293 HEK cell lines.

#### Conclusion:

A reciprocal pattern of expression was observed for both APAF-1 and EB-1 transcripts, exhibiting an interesting expressional relationship between the sense and antisense transcripts suggesting antisense-mediated expression regulation.

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#### EXAMPLE 4

# mRNA expression of muscle nicotinic Acetyl-Choline Receptor $\epsilon$ subunit and its complementary MINK transcript

#### Background:

Results:

The muscle nicotinic Acetylcholine Receptor  $\epsilon$  subunit (AChR $\epsilon$ ) encodes for one of five subunits of a ligand gated ion channel receptor located at the neuromuscular synapse. AChR $\epsilon$  is up-regulated in the postnatal period when it replaces  $\square$  subunit of the receptor [Witzamann, V. et al., (1987) FEBS Lett. 223, 104-112]. It is also up-regulated in synapse development, specifically by the trophic factor neuregulin [Martinou J. C. (1991) Pro. Natl. Acad. Sci. USA 88, 7669-7673].

# computational screen for AChR $\epsilon$ K complementary transcript was carried out.

One mRNA transcript of AChR gene was previously described [Beeson D. Eur. J. Biochem (1993) 215, 229-238] (SEQ ID NO: 29). Computational analysis recovered a complementary transcript belonging to Mink, a new member of the germinal center kinase (GCK) family (SEQ ID NO: 30) [Dan I. FEBS Lett. (2000)

In an attempt to decipher AchRe function and mechanism of regulation,

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469, 19-23] showing an overlap of at least 280 nucleotides to the AchRe mRNA, as schematically illustrated in Figure 16.

To validate the overlap of the two genes and to learn about their tissue distribution, northern analysis of a variety of human tissues was performed. Poly(A)-RNA containing membrane was hybridized with a 280 nucleotides RNA probes, corresponding to the overlap region in either antisense or sense orientation (SEQ ID NOs: 31 and 32, respectively).

As is evident from Figure 17a an AChRe transcript was expressed as a predominant 4 Kb band and had the highest expression in the heart, kidney and brain while surprisingly only a limited expression was observed in the skeletal muscle.

Hybridization with a MINK specific RNA probe revealed a major transcript of about 5 Kb, in accordance with previous results [Dan I. FEBS Lett. (2000) 469, 19-23] (Figure 17b). The mRNA transcript was ubiquitously expressed with strongest expression found in brain, liver, thymus, spleen and pancreas, again in agreement with Dan I. et al.

#### Conclusion:

The finding that AChRe and Mink genes are antisense each to one another with a significant overlap, and the fact that the two genes are co-expressed in some tissues (eg., brain) suggest the possibility that one of them may regulate the other under certain conditions.

#### EXAMPLE 5

# Expression of Cyclin E2 mRNA and complementary transcripts in a variety of human cell-lines

### 25 Background:

The human cyclin E2 gene encodes a 404-amino-acid protein that is most closely related to cyclin E. Cyclin E2 associates with Cdk2 in a functional kinase complex that is inhibited by both p27(Kip1) and p21(Cip1). The catalytic activity associated with cyclin E2 complexes is cell cycle regulated and peaks at the G1/S transition. Overexpression of cyclin E2 in mammalian cells accelerates cell-cycle progression. Unlike cyclin E1, cyclin E2 levels are low to undetectable in

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nontransformed cells and increase significantly in tumor-derived cells suggesting specific mechanism of regulation.

### Results:

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One RNA transcript was found for cyclin E2 (SEQ ID NO: 33. Computational search for natural antisense transcripts has revealed one complementary transcript for cyclin E2 messenger RNA (SEQ ID NO: 34). The overlap between the cyclin E2 sense RNA and the antisense transcript is of at least 72 nucleotides.

To confirm expression of the computationally retrieved antisense transcript for cyclin E2 as well as of cyclin E2 mRNA in human cell lines, two RNA-probes of 800 ribonucleotides were generated. Schematic location of the probes used for sense and antisense validation (SEQ ID NO: 44, Riboprobe#1 is illustrated in Figure 18).

As shown in Figure 19a, Riboprobe#1 detected two transcripts of approximately 3 Kb and 4.3 Kb. The absolute levels of the transcripts were quite heterogenic in all cell-lines examined. Both transcripts were completely absent from the Ln Cap cell line, while significantly high expression was observed in MCF-7 and DLD-1 lines, especially of the short transcript.

The same membrane was used to perform northern analysis with Riboprobe#2 in order to validate expression of antisense transcripts of cyclin E2. As is evident from Figure 19b, an antisense transcript 3.8 Kb long was observed in most cells assayed. Significantly high pattern of expression was observed in K562, MCF-7 and DLD-1 cell lines, while only a very moderate level of expression was detected in Ln Cap and HepG2 cell lines.

# 72 EXAMPLE 6

# Co-regulated expression of CIDE-B and its complementary transcript upon induction of apoptosis

The discovery of a novel naturally occurring antisense transcript to the apoptosis inducing factor, CIDE-B (see Example 2 hereinabove), suggested that the latter may be regulated by its complementary transcript, thereby establishing a novel mechanism of regulation. To address this, differential expression analysis of CIDE-B expression and its endogenous antisense transcript expression was performed following induction of apoptosis.

# Materials and methods

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transcription analysis Induction of apoptosis and reverse Monolayers of 293 cells were either left untreated (UT) or incubated with increasing concentrations of etoposide or staurosporine (Sigma IL). Twenty-four hours following addition of the drug, total RNA was extracted as decribed hereinabove. Purified RNA was further treated with DNaseI. A reverse transcription reaction were carried out with equivalent amounts of RNA in a final volume of 20 µl containing 100 pmol of the oligo(dT) primer, 250 ng of total RNA, 0.5 mM each of four deoxynucleoside triphosphates and 5 units of reverse transcriptase. The reaction mixture was incubated at 65 °C for 5 min, 42 °C for 50 min and 70 °C for 15 min. PCR was carried out in a final volume of 25 µl containing 12.5 pmol each of the oligonucleotide primers derived of exons 3 and 7 of CIDE-B (SEQ ID NOs: 39 and 40), 1 µl of RT solution and 1.75 units of Taq polymerase. Amplification was carried out by an initial denaturation step at 94 °C for 5 min followed by 35 cycles of [94 °C for 30 s, 68 °C for 30 s, and 68 °C for 130 min). At the end of the PCR amplification, products were analyzed on agarose gels stained with ethidium bromide and visualized with UV light.

#### Results

Amplification reaction yielded two major PCR products of 740 bp and 2285 bp (Figure 20). The small (740 bp) PCR product derived from the sense (CIDE-B) strand, whereas the larger (2285 bp) product represented an intronless antisense transcript. Evidently, an increase of sense transcript, concomitant with a decrease of antisense transcript, was observed following treatment with etoposide (lanes 1-4) as

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compared to untreated cells (lane 9), while no change was detected following staurosporine treatment (lanes 5-8).

These results suggest that following induction of apoptosis, antisense regulation of CIDE-B is abolished thereby allowing CIDE-B mediated apoptosis to proceed.

#### EXAMPLE 7

# Reciprocal variation in sense and antisense expression of mouse nicotinic acetylcholine receptor, epsilon subunit during differentiation

The mouse nicotinic acetylcholine receptor, epsilon (mAchR $\epsilon$ ) subunit (SEQ ID NO: 35) has a critical function in a variety of differentiation processes. To address a novel concept of antisense regulation of AchR $\epsilon$ -mediated differentiation, expression patterns of AchR $\epsilon$  and its naturally occurring antisense transcript (SEQ ID NO: 36) were examined following induction of differentiation.

#### Materials and methods

Induction of apoptosis and reverse transcription analysis - C2 mouse myoblast cells were incubated with a differentiation medium (Dulbecco's modified Eagle's medium (DMEM) including 10  $\mu$ g/ml insulin and 10  $\mu$  g/ml transferrin) or control medium (untreated) for 48 and 72 hours. Total RNA was extracted from treated and control cells and reverse-transcribed. PCR was done using F4 and R3 primers, derived from exon numbers 10 and 12 (last exon, SEQ ID NOs: 41 and 42, respectively) of the mouse nicotinic acetylcholine receptor, epsilon subunit (mAChRe) and directed at detecting sense and antisense transcripts (see Figure 21a).

# Results

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Amplification reaction showed a gradual increase in AchR $\epsilon$  transcript expression, concomitant with the differentiation state of the cells. A second amplification product, which corresponded to an unspliced transcript was seen in untreated cells and disappeared following induction of differentiation. This fragment corresponds to a putative antisense transcript of the AchR $\epsilon$ , and may represent an alternative 3' UTR of the Mink gene, of which the known transcript terminates 400 bp downstream to AchR $\epsilon$  (see Example 4). To overcome possible competition between the two transcripts, another PCR reaction was carried out using antisense

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specific riboprobes F4 and R4 (SEQ ID NO: 43). Reverse transcription products of this amlification reaction showed a single band which corresponded to a naturally occurring antisense transcript of the  $AchR\epsilon$ . As expected this transcript disappeared following induction of differentiation.

These results imply inverse regulation of the  $AchR\epsilon$  and its naturally occurring antisense transcript, during muscle cells differentiation from myoblasts to myotubes. Regulation may proceed, possibly through complementation of the sense and antisense transcripts to form dsRNA which can serve as a substrate for double strand RNA processing enzymes such as RNase H.

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#### EXAMPLE 8

# A polynucleotide database of sequences corresponding to the naturally occurring antisense transcripts identified by the present invention and their complementary sense sequences

Naturally occurring antisense sequences identified according to the teachings of the present invention and their corresponding sense sequences are provided in CD-ROM1-3 enclosed herewith (CD content is further described hereinbelow). File content is described in file AS\_patent\_data\_description.doc on CD-ROM1. Generally a "seq" text file contains the actual polynucleotide sequences; a "table" file contains summarized data pertaining to each sense-antisense sequence pair; an "alignments" file contains sequence alignments of sense and antisense overlapping regions.

The respective polypeptides, encoded by the naturally occurring antisense polynucleotides of the present invention, are described in the file "pep\_seqs\_133" in the attached CD-ROM-3. It should be noted that not all nucleotide sequences have a corresponding polypeptide sequence.

The correlation between the nucleic acid sequence and the respective polypeptide is described in the file "Trans2Pep" in the attached CD-ROM-3. Each line in the "Trans2Pep" file represents a transcript name followed by a respective polypeptide name (eg: T92147\_5 T92147\_P6)

Annotation of the polypeptides encoded by the naturally occurring antisense sequences of the present invention appear in the "annotations\_133" file in the attached CD-ROM-3, and are further described in Example 10 below.

#### Version 133

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6 files: table\_133, seqs\_133, alignments\_133, annotations\_133, pep\_seqs\_133, Trans2Pep.

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5 table is a list of 175,644 pairs of transcripts representing 6230 pairs of contigs.

Numbering: m n

m - contigs' pair number.

n – number of transcripts' pair that belongs to a pair of contigs.

(each pair of contigs is represented by one or more pairs of transcripts)

seqs contains 99,414 sequences of all the transcripts, ordered by pairs and numbered according to the list in *table*.

alignments contains the alignment of each pair of overlapping transcripts – 175,644 alignments.

Trans2Pep - table of 28,775 transcripts from seqs\_133 that correspond to 14,658

15 peptides.

pep\_seqs\_133 - 14,658 peptide sequences in Fasta format.

annotations 133 – 14,658 annotations of 14,658 peptides.

# Version 125

3 files: table\_125, seqs\_125, alignments\_125.

20 table is a list of 223,181 pairs of transcripts representing 4018 pairs of contigs.

Numbering: m n

m - contigs' pair number.

n – number of transcripts' pair that belongs to a pair of contigs.

(each pair of contigs is represented by one or more pairs of transcripts)

seqs contains 79,884 sequences of all the transcripts, ordered by pairs and numbered according to the list in *table*.

alignments contains the alignment of each pair of overlapping transcripts – 223,181 alignments.

"Table S1" and "Table S2" are further described in Example 9.

Table 3 below exemplifies the format of the Tables provided in CD-ROMs 2 and 3. Each row represents a pair of transcripts. The columns of Table 3 represent

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(from the left): the serial number of the pair, the name of the first transcript, its length in nucleotides, the name of the second transcript, its length in nucleotides, the number of base pairs that overlap between the two transcripts, offsets of overlap beginning at the first transcript, offsets of overlap beginning at the second transcript.

Table 3

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			Table 3			<del></del>
Serial	First	First	Second	Second	Overlap	Start of overlap
No.	transcript	transcript	transcript	transcript	length	in first /
	<del> </del>	length (nt)		length (nt)	(nt)	in second
	<del> </del>					transcript
570_0	AV705532_0	190	Z44352_15	783	OL: 52	OF1: 1 OF2: 1
	(SEQ ID NO: 1)		(SEQ ID NO: 2)			
570_1	AV705532_0	190	Z44352_14	1649	OL: 52	OF1: 1 OF2: 1
		<del> </del>	(SEQ ID NO: 3)			
570_2	AV705532_0	190	Z44352_13	1861	OL: 52	OF1: 1 OF2: 1
	<del> </del>	<del> </del>	(SEQ ID NO: 4)			
571_0	AW070860_0	214	T81142_7	1934	OL: 54	OF1: 1 OF2: 1162
	(SEQ ID NO: 5)		(SEQ ID NO: 6)		1	
571_1	AW070860_0	214	T81142_6	2353	OL: 54	OF1: 1 OF2: 1162
	<del> </del>	1	(SEQ ID NO: 7)			
571_2	AW070860_0	214	T81142_4	2500	OL: 54	OF1: 1 OF2: 1264
	1		(SEQ ID NO: 8)			
571_3	AW070860_0	214	T81142_3	947	OL: 54	OF1: 1 OF2: 171
		1	(SEQ ID NO: 9)			
571_4	AW070860_0	214	T81142_2	1366	OL: 54	OF1: 1 OF2: 171
		<del></del>	(SEQ ID NO: 10)			
572_0	BE046369_0	422	W26553_3	1532	OL: 52	OF1: 1 OF2: 1532
	(SEQ ID NO: 11)		(SEQ ID NO: 12)			
572_1	BE046369_0	422	W26553_2	1753	OL: 52	OF1: 1 OF2: 1753
		1	(SEQ ID NO: 13)			
572_2	BE046369_0	422	W26553_1	1832	OL: 52	OF1: 1 OF2: 1832
			(SEQ ID NO: 14)			

Pairs of transcripts are numbered, (within a contig pair, right to the underscore) that belong to a pair of contigs (numbered left to the underscore). Transcript names are arbitrary designataions.

Sequence alignment of the overlapping region in each sense and antisense pair of Table 1 is demonstrated in Figure 4a-k. Alignments were performed using the BLAST sequence alignment algorithm (Basic Local Alignment Search Tool, available through www.ncbi.nlm.nih.gov/BLAST). Interestingly, alignment profile shows high

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level of variability with regard to overlap lengths. It is conceivable that short overlaps are due to technical reasons associated with insufficient sequence data.

The putative naturally occurring antisense transcripts identified by the present invention and disclosed in the enclosed CD-ROMs can be used to detect and/or treat a variety of diseases, disorders or conditions, examples of which are listed hereinunder. For example, antisense transcripts or sequence information derived therefrom can be used to construct microarray kits (described in details in the preferred embodiments section) dedicated to diagnosing specific diseases, disorders or conditions.

The following sections list examples of proteins (subsection i), based on their molecular function, which participate in variety of diseases (listed in subsection ii), which diseases can be diagnosed/treated using information derived from naturally occurring antisense transcripts such as those uncovered by the present invention.

The present invention is of biomolecular sequences, which can be classified to functional groups based on known activity of homologous sequences. This functional group classification, allows the identification of diseases and conditions, which may be diagnosed and treated based on the novel sequence information and annotations of the present invention.

This functional group classification includes the following groups:

#### Proteins involved in Drug-Drug interactions:

The phrase "proteins involved in drug-drug interactions" refers to proteins involved in a biological process which mediates the interaction between at least two consumed drugs.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to modulate drug-drug interactions. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such drug-drug interactions.

Examples of these conditions include, but are not limited to the cytochrom P450 protein family, which is involved in the metabolism of many drugs. Examples of proteins, which are involved in drug-drug interactions are presented in Table 9.

Proteins involved in the metabolism of a pro-drug to a drug:

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The phrase "proteins involved in the metabolism of a pro-drug to a drug" refers to proteins that activate an inactive pro-drug by chemically chaining it into a biologically active compound. Preferably, the metabolizing enzyme is expressed in the target tissue thus reducing systemic side effects.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to modulate the metabolism of a prodrug into drug. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such conditions.

Examples of these proteins include, but are not limited to esterases hydrolyzing the cholesterol lowering drug simvastatin into its hydroxy acid active form.

## MDR proteins:

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The phrase "MDR proteins" refers to Multi Drug Resistance proteins that are responsible for the resistance of a cell to a range of drugs, usually by exporting these drugs outside the cell. Preferably, the MDR proteins are ABC binding cassette proteins. Preferably, drug resistance is associated with resistance to chemotherapy.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transport of molecules and macromolecules such as neurotransmitters, hormones, sugar etc. is abnormal leading to various pathologies. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of these proteins include, but are not limited to the multi-drug resistant transporter MDR1/P-glycoprotein, the gene product of MDR1, which belongs to the ATP-binding cassette (ABC) superfamily of membrane transporters and increases the resistance of malignant cells to therapy by exporting the therapeutic agent out of the cell.

# Hydrolases acting on amino acids:

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The phrase "hydrolases acting on amino acids" refers to hydrolases acting on a pair of amino acids.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transfer of a glycosyl chemical group from one molecule to another is abnormal thus, a beneficial effect may be achieved by modulation of such reaction. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to reperfusion of clotted blood vessels by TPA (Tissue Plasminogen Activator) which converts the abundant, but inactive, zymogen plasminogen to plasmin by hydrolyzing a single ARG-VAL bond in plasminogen.

## Transaminases:

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The term "transaminases" refers to enzymes transferring an amine group from one compound to another.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transfer of an amine group from one molecule to another is abnormal thus, a beneficial effect may be achieved by modulation of such reaction. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such transaminases include, but are not limited to two liver enzymes, frequently used as markers for liver function - SGOT (Serum Glutamic-Oxalocetic Transaminase - AST) and SGPT (Serum Glutamic-Pyruvic Transaminase - ALT).

# Immunoglobulins:

The term "immunoglobulins" refers to proteins that are involved in the immune and complement systems such as antigens and autoantigens, immunoglobulins, MHC and HLA proteins and their associated proteins.

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Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involving the immune system such as inflammation, autoimmune diseases, infectious diseases, and cancerous processes. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases and molecules that may be target for diagnostics include, but are not limited to members of the complement family such as C3 and C4 that their blood level is used for evaluation of autoimmune diseases and allergy state and C1 inhibitor that its absence is associated with angioedema. Thus, new variants of these genes are expected to be markers for similar events. Mutation in variants of the complement family may be associated with other immunological syndromes, such as increased bacterial infection that is associated with mutation in C3. C1 inhibitor was shown to provide safe and effective inhibition of complement activation after reperfused acute myocardial infarction and may reduce myocardial injury [Eur. Heart J. 2002, 23(21):1670-7], thus, its variant may have the same or improved effect.

# Transcription factor binding:

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The phrase "transcription factor binding" refers to proteins involved in transcription process by binding to nucleic acids, such as transcription factors, RNA and DNA binding proteins, zinc fingers, helicase, isomerase, histones, and nucleases.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins may be used to treat diseases involving transcription factors binding proteins. Such treatment may be based on transcription factor that can be used to for modulation of gene expression associated with the disease. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to breast cancer associated with ErbB-2 expression that was shown to be successfully modulated by a transcription factor [Proc. Natl. Acad. Sci. U S A. 2000, 97(4):1495-500]. Examples of

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novel transcription factors used for therapeutic protein production include, but are not limited to those described for Erythropoietin production [J. Biol. Chem. 2000, 275(43):33850-60; J. Biol. Chem. 2000, 275(43):33850-60] and zinc fingers protein transcription factors (ZFP-TF) variants [J. Biol. Chem. 2000, 275(43):33850-60].

# Small GTPase regulatory/interacting proteins:

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The phrase "Small GTPase regulatory/interacting proteins" refers to proteins capable of regulating or interacting with GTPase such as RAB escort protein, guanyl-nucleotide exchange factor, guanyl-nucleotide exchange factor adaptor, GDP-dissociation inhibitor, GTPase inhibitor, GTPase activator, guanyl-nucleotide releasing factor, GDP-dissociation stimulator, regulator of G-protein signaling, RAS interactor, RHO interactor, RAB interactor, and RAL interactor.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which G-proteases mediated signal-transduction is abnormal, either as a cause, or as a result of the disease. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to diseases related to prenylation. Modulation of prenylation was shown to affect therapy of diseases such as osteoporosis, ischemic heart disease, and inflammatory processes. Small GTPases regulatory/interacting proteins are major component in the prenylation post translation modification, and are required to the normal activity of prenylated proteins. Thus, their variants may be used for therapy of prenylation associated diseases.

#### Calcium binding proteins:

The phrase "calcium binding proteins" refers to proteins involve in calcium binding, preferably, calcium binding proteins, ligand binding or carriers, such as diacylglycerol kinase, Calpain, calcium-dependent protein serine/threonine phosphatase, calcium sensing proteins, calcium storage proteins.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat calcium involved diseases.

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Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to diseases related to hypercalcemia, hypertension, cardiovascular disease, muscle diseases, gastro-intestinal diseases, uterus relaxing, and uterus. An example for therapy use of calcium binding proteins variant may be treatment of emergency cases of hypercalcemia, with secreted variants of calcium storage proteins.

#### Oxidoreductase:

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The term "oxidoreductase" refers to enzymes that catalyze the removal of hydrogen atoms and electrons from the compounds on which they act. Preferably, oxidoreductases acting on the following groups of donors: CH-OH, CH-CH, CH-NH2, CH-NH; oxidoreductases acting on NADH or NADPH, nitrogenous compounds, sulfur group of donors, heme group, hydrogen group, diphenols and related substances as donors; oxidoreductases acting on peroxide as acceptor, superoxide radicals as acceptor, oxidizing metal ions, CH2 groups; oxidoreductases acting on reduced ferredoxin as donor; oxidoreductases acting on reduced flavodoxin as donor; and oxidoreductases acting on the aldehyde or oxo group of donors.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases caused by abnormal activity of oxidoreductases. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to malignant and autoimmune diseases in which the enzyme DHFR (DiHydroFolateReductase) that participates in folate metabolism and essential for *de novo* glycine and purine synthesis is the target for the widely used drug Methotrexate (MTX).

#### Receptors:

The term "receptors" refers to protein-binding sites on a cell's surface or interior, that recognize and binds to specific messenger molecule leading to a biological response,

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such as signal transducers, complement receptors, ligand-dependent nuclear receptors, transmembrane receptors, GPI-anchored membrane-bound receptors, various coreceptors, internalization receptors, receptors to neurotransmitters, hormones and various other effectors and ligands.

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Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases caused by abnormal activity of receptors, preferably, receptors to neurotransmitters, hormones and various other effectors and ligands. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, chronic myelomonocytic leukemia caused by growth factor  $\beta$  receptor deficiency [Rao D. S., et al., (2001) Mol. Cell Biol., 21(22):7796-806, thrombosis associated with proteaseactivated receptor deficiency [Sambrano G. R., et al., (2001) Nature, 413(6851):26-7], hypercholesterolemia associated with low density lipoprotein receptor deficiency [Koivisto U. M., et al., (2001) Cell, 105(5):575-85], familial Hibernian fever associated with tumor necrosis factor receptor deficiency [Simon A., et al., (2001) Ned Tijdschr Geneeskd, 145(2):77-8], colitis associated with immunoglobulin E receptor expression [Dombrowicz D., et al., (2001) J. Exp. Med., 193(1):25-34], and alagille syndrome associated with Jagged1 (Stankiewicz P. et al., (2001) Am. J. Med. Genet., 103(2):166-71), breast cancer associated with mutated BRCA2 and androgen. Therapeutic applications of nuclear receptors variants may be based on secreted version of receptors such as the thyroid nuclear receptor that by binding plasma free thyroid hormone to reduce its levels may have a therapeutic effect in cases of thyrotoxicosis. A secreted version of glucocorticoid nuclear receptor, by binding plasma free cortisol, thus, reducing, may have a therapeutic effect in cases of Cushing's disease (a disease associated with high cortisole levels in the plasma).

Another example of a secreted variant of a receptor is a secreted form of the TNF receptor, which is used to treat conditions in which reduction of TNF levels is of benefit including Rheumatoid Arthritis, Juvenile Rheumatoid Arthritis, Psoriatic Arthritis and Ankylosing Spondylitis.

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# Protein serine/threonine kinases:

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The phrase "protein serine/threonine kinases" refers to proteins which phosphorylate serine/threonine residues, mainly involved in signal transduction, such as transmembrane receptor protein serine/threonine kinase, 3-phosphoinositide-dependent protein kinase, DNA-dependent protein kinase, G-protein-coupled receptor phosphorylating protein kinase, SNF1A/AMP-activated protein kinase, casein kinase, calmodulin regulated protein kinase, cyclic-nucleotide dependent protein kinase, cyclin-dependent protein kinase, eukaryotic translation initiation factor  $2\alpha$  kinase, galactosyltransferase-associated kinase, glycogen synthase kinase 3, protein kinase C, receptor signaling protein serine/threonine kinase, ribosomal protein S6 kinase, and IkB kinase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases ameliorated by a modulating kinase activity. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to schizophrenia. 5-HT(2A) serotonin receptor is the principal molecular target for LSD-like hallucinogens and atypical antipsychotic drugs. It has been shown that a major mechanism for the attenuation of this receptor signaling following agonist activation typically involves the phosphorylation of serine and/or threonine residues by various kinases. Therefore, serine/threonine kinases specific for the 5-HT(2A) serotonin receptor may serve as drug targets for a disease such as schizophrenia. Other diseases that may be treated through serine/thereonine kinases modulation are Peutz-Jeghers syndrome (PJS, a rare autosomal-dominant disorder characterized by hamartomatous polyposis of the gastrointestinal tract and melanin pigmentation of the skin and mucous membranes [Hum. Mutat. 2000, 16(1):23-30], breast cancer [Oncogene. 1999, 18(35):4968-73], Type 2 diabetes insulin resistance [Am. J. Cardiol. 2002, 90(5A):11G-18G], and fanconi anemia [Blood. 2001, 98(13):3650-7].

# Channel/pore class transporters:

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The phrase "Channel/pore class transporters" refers to proteins that mediate the transport of molecules and macromolecules across membranes, such as  $\alpha$ -type channels, porins, and pore-forming toxins.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transport of molecules and macromolecules are abnormal, therefore leading to various pathologies. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to diseases of the nerves system such as Parkinson, diseases of the hormonal system, diabetes and infectious diseases such as bacterial and fungal infections. For example,  $\alpha$ -hemolysin, is a protein product of S. aureus which creates ion conductive pores in the cell membrane, thereby deminishing its integrity.

# Hydrolases, acting on acid anhydrides:

The phrase "hydrolases, acting on acid anhydrides" refers to hydrolytic enzymes that are acting on acid anhydrides, such as hydrolases acting on acid anhydrides in phosphorus-containing anhydrides or in sulfonyl-containing anhydrides, hydrolases catalyzing transmembrane movement of substances, and involved in cellular and subcellular movement.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins may be used to treat diseases in which the hydrolase-related activities are abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to glaucoma treated with carbonic anhydrase inhibitors (e.g. Dorzolamide), peptic ulcer disease treated with  $H(^+)K(^+)ATP$ ase inhibitors that were shown to affect disease by blocking gastric carbonic anhydrase (e.g. Omeprazole).

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# Transferases, transferring phosphorus-containing groups:

The phrase "transferases, transferring phosphorus-containing groups " refers to enzymes that catalyze the transfer of phosphate from one molecule to another, such as phosphotransferases using the following groups as acceptors: alcohol group, carboxyl group, nitrogenous group, phosphate; phosphotransferases with regeneration of donors catalyzing intramolecular transfers; diphosphotransferases; nucleotidyltransferase; and phosphotransferases for other substituted phosphate groups.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins may be used to treat diseases in which the transfer of a phosphorous containing functional group to a modulated moiety is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to acute MI [Ann. Emerg. Med. 2003, 42(3):343-50], Cancer [Oral. Dis. 2003, 9(3):119-28; J. Surg. Res. 2003, 113(1):102-8] and Alzheimer's disease [Am. J. Pathol. 2003, 163(3):845-58]. Examples for possible utilities of such transferases for drug improvement include, but are not limited to aminoglycosides treatment (antibiotics) to which resistance is mediated by aminoglycoside phosphotransferases [Front. Biosci. 1999, 1;4:D9-21]. Using aminoglycoside phosphotransferases variants or inhibiting these enzymes may reduce aminoglycosides resistance. Since aminoglycosides can be toxic to some patients, proving the expression of aminoglycoside phosphotransferases in a patient can deter from treating him with aminoglycosides and risking the patient in vain.

# Phosphoric monoester hydrolases:

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The phrase "phosphoric monoester hydrolases" refers to hydrolytic enzymes that are acting on ester bonds, such as nuclease, sulfuric ester hydrolase, carboxylic ester hydrolase, thiolester hydrolase, phosphoric monoester hydrolase, phosphoric diester hydrolase, triphosphoric monoester hydrolase, diphosphoric monoester hydrolase, and phosphoric triester hydrolase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of

altering expression of such proteins, may be used to treat diseases in which the hydrolytic cleavage of a covalent bond with accompanying addition of water (-H being added to one product of the cleavage and -OH to the other), is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to diabetes and CNS diseases such as Parkinson and cancer.

#### Enzyme inhibitors:

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The term "enzyme inhibitors" refers to inhibitors and suppressors of other proteins and enzymes, such as inhibitors of: kinases, phosphatases, chaperones, guanylate cyclase, DNA gyrase, ribonuclease, proteasome inhibitors, diazepambinding inhibitor, ornithine decarboxylase inhibitor, GTPase inhibitors, dUTP pyrophosphatase inhibitor, phospholipase inhibitor, protein biosynthesis inhibitors, and α-amylase inhibitors.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which beneficial effect may be achieved by modulating the activity of inhibitors and suppressors of proteins and enzymes. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to  $\alpha$ -1 antitrypsin (a natural serine proteases, which protects the lung and liver from proteolysis) deficiency associated with emphysema, COPD and liver chirosis.  $\alpha$ -1 antitrypsin is also used for diagnostics in cases of unexplained liver and lung disease. A variant of this enzyme may act as protease inhibitor or a diagnostic target for related diseases.

#### Electron transporters:

The term "Electron transporters" refers to ligand binding or carrier proteins involved in electron transport such as flavin-containing electron transporter, cytochromes, electron donors, electron acceptors, electron carriers, and cytochrome-c oxidases.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which beneficial effect may be achieved by modulating the activity of electron transporters. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to cyanide toxicity, resulting from cyanide binding to ubiquitous metalloenzymes rendering them inactive, and interfering with the electron transport. Novel electron transporters to which cyanide can bind may serve as drug targets for new cyanide antidotes.

# Transferases, transferring glycosyl groups:

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The phrase "transferases, transferring glycosyl groups" refers to enzymes that catalyze the transfer of a glycosyl chemical group from one molecule to another such as murein lytic endotransglycosylase E, and sialyltransferase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transfer of a glycosyl chemical group is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

#### Ligases, forming carbon-oxygen bonds:

The phrase "ligases, forming carbon-oxygen bonds" refers to enzymes that catalyze the linkage between carbon and oxygen such as ligase forming aminoacyltRNA and related compounds.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the linkage between carbon and oxygen in an energy dependent process is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

# Ligases:

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The term "ligases" refers to enzymes that catalyze the linkage of two molecules, generally utilizing ATP as the energy donor, also called synthetase. Examples for ligases are enzymes such as  $\beta$ -alanyl-dopamine hydrolase, carbon-oxygen bonds forming ligase, carbon-sulfur bonds forming ligase, carbon-nitrogen bonds forming ligase, carbon-carbon bonds forming ligase, and phosphoric ester bonds forming ligase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the joining together of two molecules in an energy dependent process is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to neurological disorders such as Parkinson's disease [Science. 2003, 302(5646):819-22; J. Neurol. 2003, 250 Suppl. 3:III25-III29] or epilepsy [Nat. Genet. 2003, 35(2):125-7], cancerous diseases [Cancer Res. 2003, 63(17):5428-37; Lab. Invest. 2003, 83(9):1255-65], renal diseases [Am. J. Pathol. 2003, 163(4):1645-52], infectious diseases [Arch. Virol. 2003, 148(9):1851-62] and fanconi anemia [Nat. Genet. 2003, 35(2):165-70].

# Hydrolases, acting on glycosyl bonds:

The phrase "hydrolases, acting on glycosyl bonds" refers to hydrolytic enzymes that are acting on glycosyl bonds such as hydrolases hydrolyzing N-glycosyl compounds, S-glycosyl compounds, and O-glycosyl compounds.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the hydrolase-related activities are abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include cancerous diseases [J. Natl. Cancer Inst. 2003, 95(17):1263-5; Carcinogenesis. 2003, 24(7):1281-2; author reply 1283] vascular diseases [J. Thorac. Cardiovasc. Surg. 2003, 126(2):344-57], gastrointestinal diseases

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such as colitis [J. Immunol. 2003, 171(3):1556-63] or liver fibrosis [World J. Gastroenterol. 2002, 8(5):901-7].

#### Kinases:

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The term "kinases" refers to enzymes which phosphorylate serine/threonine or tyrosine residues, mainly involved in signal transduction. Examples for kinases include enzymes such as 2-amino-4-hydroxy-6-hydroxymethyldihydropteridine pyrophosphokinase, NAD(+) kinase, acetylglutamate kinase, adenosine kinase, adenylate kinase, adenylsulfate kinase, arginine kinase, aspartate kinase, choline kinase, creatine kinase, cytidylate kinase, deoxyadenosine kinase, deoxycytidine kinase, deoxyguanosine kinase, dephospho-CoA kinase, diacylglycerol kinase, dolichol kinase, ethanolamine kinase, galactokinase, glucokinase, glutamate 5-kinase, glycerol kinase, glycerone kinase, guanylate kinase, hexokinase, homoserine kinase, hydroxyethylthiazole kinase, inositol/phosphatidylinositol kinase, ketohexokinase, mevalonate kinase, nucleoside-diphosphate kinase. pantothenate phosphoenolpyruvate carboxykinase, phosphoglycerate kinase, phosphomevalonate kinase, protein kinase, pyruvate dehydrogenase (lipoamide) kinase, pyruvate kinase, ribokinase, ribose-phosphate pyrophosphokinase, selenide, water dikinase, shikimate kinase, thiamine pyrophosphokinase, thymidine kinase, thymidylate kinase, uridine kinase, xylulokinase, 1D-myo-inositol-trisphosphate 3-kinase, phosphofructokinase, pyridoxal kinase, sphinganine kinase, riboflavin kinase. 2-dehydro-3deoxygalactonokinase, 2-dehydro-3-deoxygluconokinase, 4-diphosphocytidyl-2Cmethyl-D-erythritol kinase, GTP pyrophosphokinase, L-fuculokinase, L-ribulokinase, L-xylulokinase, isocitrate dehydrogenase (NADP<sup>+</sup>) kinase, acetate kinase, allose kinase, carbamate kinase, cobinamide kinase, diphosphate-purine nucleoside kinase, fructokinase, glycerate kinase, hydroxymethylpyrimidine kinase, hygromycin-B kinase, inosine kinase, kanamycin kinase, phosphomethylpyrimidine kinase, phosphoribulokinase, polyphosphate kinase, propionate kinase, pyruvate, water dikinase, rhamnulokinase, tagatose-6-phosphate kinase, tetraacyldisaccharide 4'kinase, thiamine-phosphate kinase, undecaprenol kinase, uridylate kinase, Nacylmannosamine kinase, D-erythro-sphingosine kinase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of

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altering expression of such proteins, may be used to treat diseases which may be ameliorated by a modulating kinase activity. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, acute lymphoblastic leukemia associated with spleen tyrosine kinase deficiency [Goodman P.A., et al., (2001) Oncogene, 20(30):3969-78], ataxia telangiectasia associated with ATM kinase deficiency [Boultwood J., (2001) J. Clin. Pathol., 54(7):512-6], congenital haemolytic anaemia associated with erythrocyte pyruvate kinase deficiency [Zanella A., et al., (2001) Br. J. Haematol., 113(1):43-8], mevalonic aciduria caused by mevalonate kinase deficiency [Houten S. M., et al., (2001) Eur. J. Hum. Genet., 9(4):253-9], and acute myelogenous leukemia associated with over-expressed death-associated protein kinase [Guzman M. L., et al., (2001) Blood, 97(7):2177-9].

#### Nucleotide binding:

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The term "nucleotide binding" refers to ligand binding or carrier proteins, involved in physical interaction with a nucleotide, preferably, any compound consisting of a nucleoside that is esterified with [ortho]phosphate or an oligophosphate at any hydroxyl group on the glycose moiety, such as purine nucleotide binding proteins.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases that are associated with abnormal nucleotide binding. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to Gout (a syndrome characterized by high urate level in the blood). Since urate is a breakdown metabolite of purines, reducing purines serum levels could have a therapeutic effect in Gout disease.

#### Tubulin binding:

The term "tubulin binding" refers to binding proteins that bind tubulin such as microtubule binding proteins.

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Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are associated with abnormal tubulin activity or structure. Binding the products of the genes of this family, or antibodies reactive therewith, can modulate a plurality of tubulin activities as well as change microtubulin structure. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, Alzheimer's disease associated with t-complex polypeptide 1 deficiency [Schuller E., et al., (2001) Life Sci., 69(3):263-70], neurodegeneration associated with *apo*E deficiency [Masliah E., et al., (1995) Exp. Neurol., 136(2):107-22], progressive axonopathy associated with disfuctional neurofilaments [Griffiths I. R., et al., (1989) Neuropathol. Appl. Neurobiol., 15(1):63-74], familial frontotemporal dementia associated with tau deficiency [astor P., et al., (2001) Ann. Neurol., 49(2):263-7], and colon cancer suppressed by APC [White R. L., (1997) Pathol. Biol. (Paris), 45(3):240-4]. En example for a drug whose target is tubulin is the anticancer drug - Taxol. Drugs having similar mechanism of action (interfering with tubulin polymerization) may be developed based on tubulin binding proteins.

# Receptor signaling proteins:

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The phrase "receptor signaling proteins" refers to receptor proteins involved in signal transduction such as receptor signaling protein serine/threonine kinase, receptor signaling protein tyrosine kinase, aryl hydrocarbon receptor nuclear translocator, hematopoeitin/interferon-class (D200-domain) cytokine receptor signal transducer, transmembrane receptor protein tyrosine kinase signaling protein, transmembrane receptor protein serine/threonine kinase signaling protein, receptor signaling protein serine/threonine kinase signaling protein, small GTPase regulatory/interacting protein, receptor signaling protein tyrosine kinase signaling protein, and receptor signaling protein serine/threonine phosphatase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the signal-

transduction is abnormal, either as a cause, or as a result of the disease. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, complete hypogonadotropic hypogonadism associated with GnRH receptor deficiency [Kottler M. L., et a., (2000) J. Clin. Endocrinol. Metab., 85(9):3002-8], severe combined immunodeficiency disease associated with IL-7 receptor deficiency [Puel A. and Leonard W. J., (2000) Curr. Opin. Immunol., 12(4):468-7], schizophrenia associated N-methyl-D-aspartate receptor deficiency [Mohn A.R., et al., (1999) Cell, 98(4):427-36], Yesinia-associated arthritis associated with tumor necrosis factor receptor p55 deficiency [Zhao Y. X., et al., (1999) Arthritis Rheum., 42(8):1662-72], and Dwarfism of Sindh caused by growth hormone-releasing hormone receptor deficiency [aheshwari H. G., et al., (1998) J. Clin. Endocrinol. Metab., 83(11):4065-74].

# Molecular function unknown:

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The phrase "molecular function unknown" refers to various proteins with unknown molecular function, such as cell surface antigens.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which regulation of the recognition, or participation or bind of cell surface antigens to other moieties may have therapeutic effect. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, autoimmune diseases, various infectious diseases, cancer diseases which involve non cell surface antigens recognition and activity.

#### Enzyme activators:

The term "enzyme activators" refers to enzyme regulators such as activators of: kinases, phosphatases, sphingolipids, chaperones, guanylate cyclase, tryptophan hydroxylase, proteases, phospholipases, caspases, proprotein convertase 2 activator, cyclin-dependent protein kinase 5 activator, superoxide-generating NADPH oxidase

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activator, sphingomyelin phosphodiesterase activator, monophenol monooxygenase activator, proteasome activator, and GTPase activator.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which beneficial effect may be achieved by modulating the activity of activators of proteins and enzymes. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to all complement related diseases, as most complement proteins activate by cleavage other complement proteins.

# Transferases, transferring one-carbon groups:

The phrase "transferases, transferring one-carbon groups" refers enzymes that catalyze the transfer of a one-carbon chemical group from one molecule to another such as methyltransferase, amidinotransferase, hydroxymethyl-, formyl- and related transferase, carboxyl- and carbamoyltransferase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transfer of a one-carbon chemical group from one molecule to another is abnormal so that a beneficial effect may be achieved by modulation of such reaction. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

# Transferases:

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The term "transferases" refers to enzymes that catalyze the transfer of a chemical group, preferably, a phosphate or amine from one molecule to another. It includes enzymes such as transferases, transferring one-carbon groups, aldehyde or ketonic groups, acyl groups, glycosyl groups, alkyl or aryl (other than methyl) groups, nitrogenous, phosphorus-containing groups, sulfur-containing groups, lipoyltransferase, deoxycytidyl transferases.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of

altering expression of such proteins, may be used to treat diseases in which the transfer of a chemical group from one molecule to another is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to cancerous diseases such as prostate cancer [Urology. 2003, 62(5 Suppl 1):55-62] or lung cancer [Invest. New Drugs. 2003, 21(4):435-43; JAMA. 2003, 22;290(16):2149-58], psychiatric disorders [Am. J. Med. Genet. 2003, 15;123B(1):64-9], colorectal disease such as Crohn's disease [Dis. Colon Rectum. 2003, 46(11):1498-507] or celiac diseases [N Engl. J. Med. 2003, 349(17):1673-4; author reply 1673-4], neurological diseases such as Prkinson's disease [J. Chem Neuroanat. 2003, 26(2):143-51], Alzheimer disease [Hum. Mol. Genet. 2003 21] or Charcot-Marie-Tooth Disease [Mol. Biol. Evol. 2003 31].

## Chaperones:

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The term "chaperones" refers to functional classes of unrelated families of proteins that assist the correct non-covalent assembly of other polypeptide-containing structures *in vivo*, but are not components of these assembled structures when they a performing their normal biological function. The group of chaperones include proteins such as ribosomal chaperone, peptidylprolyl isomerase, lectin-binding chaperone, nucleosome assembly chaperone, chaperonin ATPase, cochaperone, heat shock protein, HSP70/HSP90 organizing protein, fimbrial chaperone, metallochaperone, tubulin folding, and HSC70-interacting protein.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are associated with abnormal protein activity, structure, degradation or accumulation of proteins. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to neurological syndromes [J. Neuropathol. Exp. Neurol. 2003, 62(7):751-64; Antioxid Redox Signal. 2003, 5(3):337-48; J. Neurochem. 2003, 86(2):394-404], neurological diseases such as Parkinson's disease [Hum. Genet. 2003, 6; Neurol Sci. 2003, 24(3):159-60; J. Neurol.

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2003, 250 Suppl. 3:III25-III29] ataxia [J. Hum. Genet. 2003;48(8):415-9] or Alzheimer diseases [J. Mol. Neurosci. 2003, 20(3):283-6; J. Alzheimers Dis. 2003, 5(3):171-7], cancerous diseases [Semin. Oncol. 2003, 30(5):709-16], prostate cancer [Semin. Oncol. 2003, 30(5):709-16] metabolic diseases [J Neurochem. 2003, 87(1):248-56], infectious diseases, such as prion infection [EMBO J. 2003, 22(20):5435-5445]. Chaperones may be also used for manipulating therapeutic proteins binding to their receptors therefore, improving their therapeutic effect.

# Cell adhesion molecule:

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The phrase "cell adhesion molecule" refers to proteins that serve as adhesion molecules between adjoining cells such as membrane-associated protein with guanylate kinase activity, cell adhesion receptor, neuroligin, calcium-dependent cell adhesion molecule, selectin, calcium-independent cell adhesion molecule, and extracellular matrix protein.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which adhesion between adjoining cells is involved, typically conditions in which the adhesion is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to cancer in which abnormal adhesion may cause and enhance the process of metastasis and abnormal growth and development of various tissues in which modulation adhesion among adjoining cells can improve the condition. Leucocyte-endothlial interactions characterized by adhesion molecules involved in interactions between cells lead to a tissue injury and ischemia reperfusion disorders in which activated signals generated during ischemia may trigger an exuberant inflammatory response during reperfusion, provoking greater tissue damage than initial ischemic insult [Crit. Care Med. 2002, 30(5 Suppl):S214-9]. The blockade of leucocyte-endothelial adhesive interactions has the potential to reduce vascular and tissue injury. This blockade may be achieved using a soluble variant of the adhesion molecule.

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States of septic shock and ARDS involve large recruitment of neutrophil cells to the damaged tissues. Neutrophil cells bind to the endothelial cells in the target tissues through adhesion molecules. Neutrophils possess multiple effector mechanisms that can produce endothelial and lung tissue injury, and interfere with pulmonary gas transfer by disruption of surfactant activity [Eur. J. Surg. 2002, 168(4):204-14]. In such cases, the use of soluble variant of the adhesion molecule may decrease the adhesion of neutrophils to the damaged tissues.

Examples of such diseases include, but are not limited to, Wiskott-Aldrich syndrome associated with WAS deficiency [Westerberg L., et al., (2001) Blood, 98(4):1086-94], asthma associated with intercellular adhesion molecule-1 deficiency [Tang M. L. and Fiscus L. C., (2001) Pulm. Pharmacol. Ther., 14(3):203-10], intra-atrial thrombogenesis associated with increased von Willebrand factor activity [Fukuchi M., et al., (2001) J. Am. Coll. Cardiol., 37(5):1436-42], junctional epidermolysis bullosa associated with laminin 5- $\beta$ -3 deficiency [Robbins P. B., et al., (2001) Proc. Natl. Acad. Sci., 98(9):5193-8], and hydrocephalus caused by neural adhesion molecule L1 deficiency [Rolf B., et al., (2001) Brain Res., 891(1-2):247-52].

# Motor proteins:

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The term "motor proteins" refers to proteins that generate force or energy by the hydrolysis of ATP and that function in the production of intracellular movement or transportation. Examples of such proteins include microfilament motor, axonemal motor, microtubule motor, and kinetochore motor (dynein, kinesin, or myosin).

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which force or energy generation is impaired. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, malignant diseases where microtubules are drug targets for a family of anticancer drugs such as myodystrophies and myopathies [Trends Cell Biol. 2002, 12(12):585-91], neurological disorders [Neuron. 2003, 25;40(1):25-40; Trends Biochem. Sci. 2003, 28(10):558-65;

Med. Genet. 2003, 40(9):671-5], and hearing impairment [Trends Biochem. Sci. 2003, 28(10):558-65].

#### Defense/immunity proteins:

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The term "defense/immunity proteins" refers to proteins that are involved in the immune and complement systems such as acute-phase response proteins, antimicrobial peptides, antiviral response proteins, blood coagulation factors, complement components, immunoglobulins, major histocompatibility complex antigens and opsonins.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involving the immunological system including inflammation, autoimmune diseases, infectious diseases, as well as cancerous processes or diseases which are manifested by abnormal coagulation processes, which may include abnormal bleeding or excessive coagulation. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, late (C5-9) complement component deficiency associated with opsonin receptor allotypes [Fijen C. A., et al., (2000) Clin. Exp. Immunol., 120(2):338-45], combined immunodeficiency associated with defective expression of MHC class II genes [Griscelli C., et al., (1989) Immunodefic. Rev. 1(2):135-53], loss of antiviral activity of CD4 T cells caused by neutralization of endogenous TNFα [Pavic I., et al., (1993) J. Gen. Virol., 74 (Pt 10):2215-23], autoimmune diseases associated with natural resistance-associated macrophage protein deficiency [Evans C. A., et al., (2001) Neurogenetics, 3(2):69-78], Epstein-Barr virus-associated lymphoproliferative disease inhibited by combined GM-CSF and IL-2 therapy [Baiocchi R. A., et al., (2001) J. Clin. Invest., 108(6):887-94], and sepsis in which activated protein C is a therapeutic protein itself.

#### Intracellular transporters:

The term "intracellular transporters" refers to proteins that mediate the transport of molecules and macromolecules inside the cell, such as intracellular

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nucleoside transporter, vacuolar assembly proteins, vesicle transporters, vesicle fusion proteins, type II protein secretors.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transport of molecules and macromolecules is abnormal leading to various pathologies. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

#### Transporters:

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The term "transporters" refers to proteins that mediate the transport of molecules and macromolecules, such as channels, exchangers, and pumps. Transporters include proteins such as: amine/polyamine transporter, lipid transporter, neurotransmitter transporter, organic acid transporter, oxygen transporter, water transporter, carriers, intracellular transports, protein transporters, ion transporters, carbohydrate transporter, polyol transporter, amino acid transporters, vitamin/cofactor transporters, siderophore transporter, drug transporter, channel/pore class transporter, group translocator, auxiliary transport proteins, permeases, murein transporter, organic alcohol transporter, nucleobase, nucleoside, and nucleotide and nucleic acid transporters.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the transport of molecules and macromolecules such as neurotransmitters, hormones, sugar etc. is impaired leading to various pathologies. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, glycogen storage disease caused by glucose-6-phosphate transporter deficiency [Hiraiwa H., and Chou J. Y. (2001) DNA Cell Biol., 20(8):447-53], tangier disease associated with ATP-binding cassette transporter-1 deficiency [McNeish J., et al., (2000) Proc. Natl. Acad. Sci., 97(8):4245-50], systemic primary carnitine deficiency associated with organic cation transporter deficiency [Tang N. L., et al., (1999) Hum. Mol. Genet., 8(4):655-60], Wilson

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disease associated with copper-transporting ATPases deficiency [Payne A. S., et al., (1998) Proc. Natl. Acad. Sci. 95(18):10854-9], and atelosteogenesis associated with diastrophic dysplasia sulphate transporter deficiency [Newbury-Ecob R., (1998) J. Med. Genet., 35(1):49-53], Central Nervous system diseases treated by inhibiting neurotransmitter transporter (e.g. Depression, treated with serotonin transporters inhibitors – Prozac), and Cystic fibrosis mediated by the chloride channel CFTR. Other transporter related diseases are cancer [Oncogene. 2003, 22(38):6005-12] and especially cancer resistant to treatment [Oncologist. 2003, 8(5):411-24; J. Med. Invest. 2003, 50(3-4):126-35], infectious diseases, especially fungal infections [Annu. Rev. Phytopathol. 2003, 41:641-67], neurological diseases, such as Parkinson [FASEB J. 2003, Sep 4 [Epub ahead of print]], and cardiovascular diseases, including hypercholesterolemia [Am. J. Cardiol. 2003, 92(4B):10K-16K].

There are about 30 membrane transporter genes linked to a known genetic clinical syndrome. Secreted versions of splice variants of transporters may be therapeutic as the case with soluble receptors. These transporters may have the capability to bind the compound in the serum they would normally bind on the membrane. For example, a secreted form ATP7B, a transporter involved in Wilson's disease, is expected to bind plasma Copper, therefore have a desired therapeutic effect in Wilson's disease.

# Lyases:

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The term "lyases" refers to enzymes that catalyze the formation of double bonds by removing chemical groups from a substrate without hydrolysis or catalyze the addition of chemical groups to double bonds. It includes enzymes such as carbon-carbon lyase, carbon-oxygen lyase, carbon-nitrogen lyase, carbon-sulfur lyase, carbon-halide lyase, and phosphorus-oxygen lyase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the double bonds formation catalyzed by these enzymes is impaired. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, autoimmune diseases [JAMA. 2003, 290(13):1721-8; JAMA. 2003, 290(13):1713-20], diabetes [Diabetes.

2003, 52(9):2274-8], neurological disorders such as epilepsy [J. Neurosci. 2003, 23(24):8471-9], Parkinson [J. Neurosci. 2003, 23(23):8302-9; Lancet. 2003, 362(9385):712] or Creutzfeldt-Jakob disease [Clin. Neurophysiol. 2003, 114(9):1724-8], and cancerous diseases [J. Pathol. 2003, 201(1):37-45; J. Pathol. 2003, 201(1):37-45; Cancer Res. 2003, 63(16):4952-9; Eur. J. Cancer. 2003, 39(13):1899-903].

# Actin binding proteins:

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The phrase "actin binding proteins" refers to proteins binding actin as actin cross-linking, actin bundling, F-actin capping, actin monomer binding, actin lateral binding, actin depolymerizing, actin monomer sequestering, actin filament severing, actin modulating, membrane associated actin binding, actin thin filament length regulation, and actin polymerizing proteins.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which actin binding is impaired. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, neuromuscular diseases such as muscular dystrophy [Neurology. 2003, 61(3):404-6], Cancerous diseases [Urology. 2003, 61(4):845-50; J. Cutan. Pathol. 2002, 29(7):430; Cancer. 2002, 94(6):1777-86; Clin. Cancer Res. 2001, 7(8):2415-24; Breast Cancer Res. Treat. 2001, 65(1):11-21], renal diseases such as glomerulonephritis [J. Am. Soc. Nephrol. 2002, 13(2):322-31; Eur. J. Immunol. 2001, 31(4):1221-7], and gastrointestinal diseases such as Crohn's disease [J. Cell Physiol. 2000, 182(2):303-9].

#### Protein binding proteins:

The phrase "protein binding proteins" refers to proteins involved in diverse biological functions through binding other proteins. Examples of such biological function include intermediate filament binding, LIM-domain binding, LLR-domain binding, clathrin binding, ARF binding, vinculin binding, KU70 binding, troponin C binding PDZ-domain binding, SH3-domain binding, fibroblast growth factor binding, membrane-associated protein with guanylate kinase activity interacting, Wnt-protein binding, DEAD/H-box RNA helicase binding,  $\beta$ -amyloid binding, myosin binding,

TATA-binding protein binding DNA topoisomerase I binding, polypeptide hormone binding, RHO binding, FH1-domain binding, syntaxin-1 binding, HSC70-interacting, transcription factor binding, metarhodopsin binding, tubulin binding, JUN kinase binding, RAN protein binding, protein signal sequence binding, importin  $\alpha$  export receptor, poly-glutamine tract binding, protein carrier,  $\beta$ -catenin binding, protein C-terminus binding, lipoprotein binding, cytoskeletal protein binding protein, nuclear localization sequence binding, protein phosphatase 1 binding, adenylate cyclase binding, eukaryotic initiation factor 4E binding, calmodulin binding, collagen binding, insulin-like growth factor binding, lamin binding, profilin binding, tropomyosin binding, actin binding, peroxisome targeting sequence binding, SNARE binding, and cyclin binding.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are associated with impaired protein binding. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, neurological and psychiatric diseases [J. Neurosci. 2003, 23(25):8788-99; Neurobiol. Dis. 2003, 14(1):146-56; J. Neurosci. 2003, 23(17):6956-64; Am. J. Pathol. 2003, 163(2):609-19], and cancerous diseases [Cancer Res. 2003, 63(15):4299-304; Semin. Thromb. Hemost. 2003, 29(3):247-58; Proc. Natl. Acad. Sci. U S A. 2003, 100(16):9506-11].

## Ligand binding or carrier proteins:

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The phrase "ligand binding or carrier proteins" refers to proteins involved in diverse biological functions such as: pyridoxal phosphate binding, carbohydrate binding, magnesium binding, amino acid binding, cyclosporin A binding, nickel binding, chlorophyll binding, biotin binding, penicillin binding, selenium binding, tocopherol binding, lipid binding, drug binding, oxygen transporter, electron transporter, steroid binding, juvenile hormone binding, retinoid binding, heavy metal binding, calcium binding, protein binding, glycosaminoglycan binding, folate binding, odorant binding, lipopolysaccharide binding and nucleotide binding.

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Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are associated with impaired function of these proteins. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, neurological disorders [J. Med. Genet. 2003, 40(10):733-40; J. Neuropathol. Exp. Neurol. 2003, 62(9):968-75; J. Neurochem. 2003, 87(2):427-36], autoimmune diseases (N. Engl. J. Med. 2003, 349(16):1526-33; JAMA. 2003, 290(13):1721-8]; gastroesophageal reflux disease [Dig. Dis. Sci. 2003, 48(9):1832-8], cardiovascular diseases [J. Vasc. Surg. 2003, 38(4):827-32], cancerous diseases [Oncogene. 2003, 22(43):6699-703; Br. J. Haematol. 2003, 123(2):288-96], respiratory diseases [Circulation. 2003, 108(15):1839-44], and ophtalmic diseases [Ophthalmology. 2003, 110(10):2040-4; Am. J. Ophthalmol. 2003, 136(4):729-32].

#### ATPases:

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The term "ATPases" refers to enzymes that catalyze the hydrolysis of ATP to ADP, releasing energy that is used in the cell. This group include enzymes such as plasma membrane cation-transporting ATPase, ATP-binding cassette (ABC) transporter, magnesium-ATPase, hydrogen-/sodium-translocating ATPase or ATPase translocating any other elements, arsenite-transporting ATPase, protein-transporting ATPase, DNA translocase, P-type ATPase, and hydrolase, acting on acid anhydrides involved in cellular and subcellular movement.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are associated with impaired conversion of the hydrolysis of ATP to ADP or resulting energy use. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, infectious diseases such as *helicobacter pylori* ulcers [BMC Gastroenterol. 2003, Nov 6], Neurological, muscular and psychiatric diseases [Int. J. Neurosci. 2003, 13(12):1705-1717; Int. J.

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Neurosci. 2003, 113(11):1579-1591; Ann. Neurol. 2003, 54(4):494-500], Amyotrophic Lateral Sclerosis [Other Motor Neuron Disord. 2003 4(2):96-9], cardiovascular diseases [J. Nippon. Med. Sch. 2003, 70(5):384-92; Endocrinology. 2003, 144(10):4478-83], metabolic diseases [Mol. Pathol. 2003, 56(5):302-4; Neurosci. Lett. 2003, 350(2):105-8], and peptic ulcer disease treated with inhibitors of the gastric H<sup>+</sup>-K<sup>+</sup> ATPase (e.g. Omeprazole) responsible for acid secretion in the gastric mucosa.

# Carboxylic ester hydrolases:

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The phrase carboxylic ester hydrolases" refers to hydrolytic enzymes acting on carboxylic ester bonds such as N-acetylglucosaminylphosphatidylinositol deacetylase, 2-acetyl-1-alkylglycerophosphocholine esterase, aminoacyl-tRNA hydrolase, arylesterase, carboxylesterase, cholinesterase, gluconolactonase, sterol esterase, acetylesterase, carboxymethylenebutenolidase, protein-glutamate methylesterase, lipase, and 6-phosphogluconolactonase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the hydrolytic cleavage of a covalent bond with accompanying addition of water (-H being added to one product of the cleavage and -OH to the other) is abnormal so that a beneficial effect may be achieved by modulation of such reaction. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, autoimmune neuromuscular disease Myasthenia Gravis, treated with cholinesterase inhibitors.

#### Hydrolase, acting on ester bonds:

The phrase "hydrolase, acting on ester bonds" refers to hydrolytic enzymes acting on ester bonds such as nucleases, sulfuric ester hydrolase, carboxylic ester hydrolases, thiolester hydrolase, phosphoric monoester hydrolase, phosphoric diester hydrolase, triphosphoric monoester hydrolase, diphosphoric monoester hydrolase, and phosphoric triester hydrolase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the hydrolytic

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cleavage of a covalent bond with accompanying addition of water (-H being added to one product of the cleavage and -OH to the other), is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

# Hydrolases:

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The term "hydrolases" refers to hydrolytic enzymes such as GPI-anchor transamidase, peptidases, hydrolases, acting on ester bonds, glycosyl bonds, ether bonds, carbon-nitrogen (but not peptide) bonds, acid anhydrides, acid carbon-carbon bonds, acid halide bonds, acid phosphorus-nitrogen bonds, acid sulfur-nitrogen bonds, acid carbon-phosphorus bonds, acid sulfur-sulfur bonds.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the hydrolytic cleavage of a covalent bond with accompanying addition of water (-H being added to one product of the cleavage and -OH to the other) is abnormal. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, cancerous diseases [Cancer. 2003, 98(9):1842-8; Cancer. 2003, 98(9):1822-9], neurological diseases such as Parkinson diseases [J. Neurol. 2003, 250 Suppl 3:III15-III24; J. Neurol. 2003, 250 Suppl 3:III2-III10], endocrinological diseases such as pancreatitis [Pancreas. 2003, 27(4):291-6] or childhood genetic diseases [Eur. J. Pediatr. 1997, 156(12):935-8], coagulation diseases [BMJ. 2003, 327(7421):974-7], cardiovascular diseases [Ann. Intern. Med. 2003, Oct 139(8):670-82], autoimmunity diseases [J. Med. Genet. 2003, 40(10):761-6], and metabolic diseases [Am. J. Hum. Genet. 2001, 69(5):1002-12].

#### Enzymes:

The term "enzymes' refers to naturally occurring or synthetic macromolecular substance composed mostly of protein, that catalyzes, to various degree of specificity, at least one (bio)chemical reactions at relatively low temperatures. The action of RNA that has catalytic activity (ribozyme) is often also regarded as enzymatic. Nevertheless, enzymes are mainly proteinaceous and are often easily inactivated by

heating or by protein-denaturing agents. The substances upon which they act are known as substrates, for which the enzyme possesses a specific binding or active site.

The group of enzymes include various proteins possessing enzymatic activities such as mannosylphosphate transferase, para-hydroxybenzoate:polyprenyltransferase, rieske iron-sulfur protein, imidazoleglycerol-phosphate synthase, sphingosine hydroxylase, tRNA 2'-phosphotransferase, sterol C-24(28) reductase, C-8 sterol isomerase, C-22 sterol desaturase, C-14 sterol reductase, C-3 sterol dehydrogenase (C-4 sterol decarboxylase), 3-keto sterol reductase, C-4 methyl sterol oxidase, dihydronicotinamide riboside quinone reductase, glutamate phosphate reductase, DNA repair enzyme, telomerase, α-ketoacid dehydrogenase, β-alanyl-dopamine synthase, RNA editase, aldo-keto reductase, alkylbase DNA glycosidase, glycogen debranching enzyme, dihydropterin deaminase, dihydropterin oxidase, dimethylnitrosamine demethylase, ecdysteroid UDP-glucosyl/UDP glucuronosyl transferase, cleavage system, helicase, histone deacetylase, mevaldate reductase, monooxygenase, poly(ADP-ribose) glycohydrolase, pyruvate dehydrogenase, serine esterase, sterol carrier protein X-related thiolase, transposase, tyramine- $\beta$  hydroxylase, aminobenzoic acid (PABA) synthase, glu-tRNA(gln) amidotransferase, molybdopterin cofactor sulfurase, lanosterol 14-α-demethylase, aromatase, 4-hydroxybenzoate 7,8-dihydro-8-oxoguanine-triphosphatase, octaprenyltransferase, CDP-alcohol phosphotransferase, 2,5-diamino-6-(ribosylamino)-4(3H)-pyrimidonone 5'-phosphate phosphohydrolase, diphosphoinositol polyphosphate y-glutamyl deaminase, carboxylase, small protein conjugating enzyme, small protein activating enzyme, 1deoxyxylulose-5-phosphate synthase, 2'-phosphotransferase, 2-octoprenyl-3-methyl-6-2,4-2C-methyl-D-erythritol methoxy-1,4-benzoquinone hydroxylase, cyclodiphosphate synthase, 3,4 dihydroxy-2-butanone-4-phosphate synthase, 4-amino-4-deoxychorismate lyase, 4-diphosphocytidyl-2C-methyl-D-erythritol synthase, ADP-L-glycero-D-manno-heptose synthase, D-erythro-7,8-dihydroneopterin triphosphate 2'epimerase, N-ethylmaleimide reductase, O-antigen ligase, O-antigen polymerase, UDP-2,3-diacylglucosamine hydrolase, arsenate reductase, carnitine racemase, cobalamin [5'-phosphate] synthase, cobinamide phosphate guanylyltransferase, enterobactin synthetase, enterochelin esterase, enterochelin synthetase, glycolate transferase, peptidoglycan synthetase, oxidase, integrase, lauroyl

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phosphopantetheinyltransferase, phosphoglucosamine mutase, phosphoheptose isomerase, quinolinate synthase, siroheme synthase, N-acylmannosamine-6-phosphate 2-epimerase, N-acetyl-anhydromuramoyl-L-alanine amidase, carbon-phosphorous lyase, heme-copper terminal oxidase, disulfide oxidoreductase, phthalate dioxygenase reductase, sphingosine-1-phosphate lyase, molybdopterin oxidoreductase, dehydrogenase, NADPH oxidase, naringenin-chalcone synthase, N-ethylammeline chlorohydrolase, polyketide synthase, aldolase, kinase, phosphatase, CoA-ligase, oxidoreductase, transferase, hydrolase, lyase, isomerase, ligase, ATPase, sulfhydryl oxidase, lipoate-protein ligase,  $\delta$ -1-pyrroline-5-carboxyate synthetase, lipoic acid synthase, and tRNA dihydrouridine synthase.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which can be ameliorated by modulating the activity of various enzymes which are involved both in enzymatic processes inside cells as well as in cell signaling. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

#### Cytoskeletal proteins:

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The term "cytoskeletal proteins" refers to proteins involved in the structure formation of the cytoskeleton.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are caused or due to abnormalities in cytoskeleton, including cancerous cells, and diseased cells such as cells that do not propagate, grow or function normally. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, liver diseases such as cholestatic diseases [Lancet. 2003, 362(9390):1112-9], vascular diseases [J. Cell Biol. 2003, 162(6):1111-22], endocrinological diseases [Cancer Res. 2003, 63(16):4836-41], neuromuscular disorders such as muscular dystrophy [Neuromuscul. Disord. 2003, 13(7-8):579-88], or myopathy [Neuromuscul. Disord. 2003, 13(6):456-67] neurological

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disorders such as Alzheimer's disease [J. Alzheimers Dis. 2003, 5(3):209-28], cardiac disorders [J. Am. Coll. Cardiol. 2003, 42(2):319-27], skin disorders [J. Am. Coll. Cardiol. 2003, 42(2):319-27], and cancer [Proteomics. 2003, 3(6):979-90].

# Structural proteins:

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The term "structural proteins" refers to proteins involved in the structure formation of the cell, such as structural proteins of ribosome, cell wall structural proteins, structural proteins of cytoskeleton, extracellular matrix structural proteins, extracellular matrix glycoproteins, amyloid proteins, plasma proteins, structural proteins of eye lens, structural protein of chorion (sensu Insecta), structural protein of cuticle (sensu Insecta), puparial glue protein (sensu Diptera), structural proteins of bone, yolk proteins, structural proteins of muscle, structural protein of vitelline membrane (sensu Insecta), structural proteins of peritrophic membrane (sensu Insecta), and structural proteins of nuclear pores.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases which are caused by abnormalities in cytoskeleton, including cancerous cells, and diseased cells such as cells that do not propagate, grow or function normally. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, blood vessels diseases such as aneurysms [Cardiovasc. Res. 2003, 60(1):205-13], joint diseases [Rheum. Dis. Clin. North Am. 2003, 29(3):631-45], muscular diseases such as muscular dystrophies [Curr. Opin. Clin. Nutr. Metab. Care. 2003, 6(4):435-9], neuronal diseases such as encephalitis [Neurovirol. 2003, 9(2):274-83], retinitis pigmentosa [Dev. Ophthalmol. 2003, 37:109-25], and infectious diseases [J. Virol. Methods. 2003, 109(1):75-83; FEMS Immunol. Med. Microbiol. 2003, 35(2):125-30; J. Exp. Med. 2003, 197(5):633-42].

#### Ligands:

The term "ligands" refers to proteins that bind to another chemical entity to form a larger complex, involved in various biological processes, such as signal transduction, metabolism, growth and differentiation, etc. This group of proteins includes opioid peptides, baboon receptor ligand, branchless receptor ligand,

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breathless receptor ligand, ephrin, frizzled receptor ligand, frizzled-2 receptor ligand, heartless receptor ligand, Notch receptor ligand, patched receptor ligand, punt receptor ligand, Ror receptor ligand, saxophone receptor ligand, SE20 receptor ligand, sevenless receptor ligand, smooth receptor ligand, thickveins receptor ligand, Toll receptor ligand, Torso receptor ligand, death receptor ligand, scavenger receptor ligand, neuroligin, integrin ligand, hormones, pheromones, growth factors, and sulfonylurea receptor ligand.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involved in impaired hormone function or diseases which involve abnormal secretion of proteins which may be due to abnormal presence, absence or impaired normal response to normal levels of secreted proteins. Those secreted proteins include hormones, neurotransmitters, and various other proteins secreted by cells to the extracellular environment. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, analgesia inhibited by orphanin FQ/nociceptin [Shane R., et al., (2001) Brain Res., 907(1-2):109-16], stroke protected by estrogen [Alkayed N. J., et al., (2001) J. Neurosci., 21(19):7543-50], atherosclerosis associated with growth hormone deficiency [Elhadd T.A., et al., (2001) J. Clin. Endocrinol. Metab., 86(9):4223-32], diabetes inhibited by α-galactosylceramide [Hong S., et al., (2001) Nat. Med., 7(9):1052-6], and Huntington's disease associated with huntingtin deficiency [Rao D. S., et al., (2001) Mol. Cell Biol., 21(22):7796-806].

## Signal transducer:

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The term "signal transducers" refers to proteins such as activin inhibitors, receptor-associated proteins,  $\alpha$ -2 macroglobulin receptors, morphogens, quorum sensing signal generators, quorum sensing response regulators, receptor signaling proteins, ligands, receptors, two-component sensor molecules, and two-component response regulators.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases in which the signal-transduction

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is impaired, either as a cause, or as a result of the disease. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, altered sexual dimorphism associated with signal transducer and activator of transcription 5b [Udy G. B., et al., (1997) Proc. Natl. Acad. Sci. U S A, 94(14):7239-44], multiple sclerosis associated with sgp130 deficiency [Padberg F., et al., (1999) J. Neuroimmunol., 99(2):218-23], intestinal inflammation associated with elevated signal transducer and activator of transcription 3 activity [Suzuki A., et al., (2001) J Exp Med, 193(4):471-81], carcinoid tumor inhibited by increased signal transducer and activators of transcription 1 and 2 [Zhou Y., et al., (2001) Oncology, 60(4):330-8], and esophageal cancer associated with loss of EGF-STAT1 pathway [Watanabe G., et al., (2001) Cancer J., 7(2):132-9].

# RNA polymerase II transcription factors:

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The phrase "RNA polymerase II transcription factors" refers to proteins such as specific and non-specific RNA polymerase II transcription factors, enhancer binding, ligand-regulated transcription factor, and general RNA polymerase II transcription factors.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involving impaired function of RNA polymerase II transcription factors. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, cardiac diseases [Cell Cycle. 2003, 2(2):99-104], xeroderma pigmentosum [Bioessays. 2001, 23(8):671-3; Biochim. Biophys. Acta. 1997, 1354(3):241-51], muscular atrophy [J. Cell Biol. 2001, 152(1):75-85], neurological diseases such as Alzheimer's disease [Front Biosci. 2000, 5:D244-57], cancerous diseases such as breast cancer [Biol. Chem. 1999, 380(2):117-28], and autoimmune disorders [Clin. Exp. Immunol. 1997, 109(3):488-94].

#### RNA binding proteins:

The phrase "RNA binding proteins" refers to RNA binding proteins involved in splicing and translation regulation such as tRNA binding proteins, RNA helicases,

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double-stranded RNA and single-stranded RNA binding proteins, mRNA binding proteins, snRNA cap binding proteins, 5S RNA and 7S RNA binding proteins, polypyrimidine tract binding proteins, snRNA binding proteins, and AU-specific RNA binding proteins.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involving transcription and translation factors such as helicases, isomerases, histones and nucleases, diseases where there is impaired transcription, splicing, post-transcriptional processing, translation or stability of the RNA. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such diseases include, but are not limited to, cancerous diseases such as lymphomas [Tumori. 2003, 89(3):278-84], prostate cancer [Prostate. 2003, 57(1):80-92] or lung cancer [J. Pathol. 2003, 200(5):640-6], blood diseases, such as fanconi anemia [Curr. Hematol. Rep. 2003, 2(4):335-40], cardiovascular diseases such as atherosclerosis [J. Thromb. Haemost. 2003, 1(7):1381-90] muscle diseases [Trends Cardiovasc. Med. 2003, 13(5):188-95] and brain and neuronal diseases [Trends Cardiovasc. Med. 2003, 13(5):188-95; Neurosci. Lett. 2003, 342(1-2):41-4].

# Nucleic acid binding proteins:

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The phrase "nucleic acid binding proteins" refers to proteins involved in RNA and DNA synthesis and expression regulation such as transcription factors, RNA and DNA binding proteins, zinc fingers, helicase, isomerase, histones, nucleases, ribonucleoproteins, and transcription and translation factors.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involving DNA or RNA binding proteins such as: helicases, isomerases, histones and nucleases, for example diseases where there is abnormal replication or transcription of DNA and RNA respectively. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

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Examples of such diseases include, but are not limited to, neurological diseases such as renitis pigmentoas [Am. J. Ophthalmol. 2003, 136(4):678-87] parkinsonism [Proc. Natl. Acad. Sci. U S A. 2003, 100(18):10347-52], Alzheimer [J. Neurosci. 2003, 23(17):6914-27] and canavan diseases [Brain Res Bull. 2003, 61(4):427-35], cancerous diseases such as leukemia [Anticancer Res. 2003, 23(4):3419-26] or lung cancer [J. Pathol. 2003, 200(5):640-6], miopathy [Neuromuscul Disord. 2003, 13(7-8):559-67] and liver diseases [J. Pathol. 2003, 200(5):553-60].

#### Proteins involved in Metabolism:

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The phrase "proteins involved in metabolism" refers to proteins involved in the totality of the chemical reactions and physical changes that occur in living organisms, comprising anabolism and catabolism; may be qualified to mean the chemical reactions and physical processes undergone by a particular substance, or class of substances, in a living organism. This group includes proteins involved in the reactions of cell growth and maintenance such as: metabolism resulting in cell growth, carbohydrate metabolism, energy pathways, electron transport, nucleobase, nucleoside, nucleotide and nucleic acid metabolism, protein metabolism and modification, amino acid and derivative metabolism, protein targeting, lipid metabolism, aromatic compound metabolism, one-carbon compound metabolism, coenzymes and prosthetic group metabolism, sulfur metabolism, phosphorus metabolism, phosphate metabolism, oxygen and radical metabolism, xenobiotic metabolism, nitrogen metabolism, fat body metabolism (sensu Insecta), protein localization, catabolism, biosynthesis, toxin metabolism, methylglyoxal metabolism, cyanate metabolism, glycolate metabolism, carbon utilization and antibiotic metabolism.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat diseases involving cell metabolism. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases.

Examples of such metabolism-related diseases include, but are not limited to, multisystem mitochondrial disorder caused by mitochondrial DNA cytochrome C

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oxidase II deficiency [Campos Y., et al., (2001) Ann. Neurol. 50(3):409-13], conduction defects and ventricular dysfunction in the heart associated with heterogeneous connexin43 expression [Gutstein D. E., et al., (2001) Circulation, 104(10):1194-9], atherosclerosis associated with growth suppressor p27 deficiency [Diez-Juan A., and Andres V. (2001) FASEB J., 15(11):1989-95], colitis associated with glutathione peroxidase deficiency [Esworthy R. S., et al., (2001) Am. J. Physiol. Gastrointest. Liver Physiol., 281(3):G848-55], systemic lupus erythematosus associated with deoxyribonuclease I deficiency [Yasutomo K., et al., (2001) Nat. Genet., 28(4):313-4], alcoholic pancreatitis [Pancreas. 2003, 27(4):281-5], amyloidosis and diseases that are related to amyloid metabolism, such as FMF, atherosclerosis, diabetes, and especially diabetes long term consequences, neurological diseases such as Creutzfeldt-Jakob disease, and Parkinson or Rasmussen's encephalitis.

## Cell growth and/or maintenance proteins:

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The phrase "Cell growth and/or maintenance proteins" refers to proteins involved in any biological process required for cell survival, growth and maintenance, including proteins involved in biological processes such as cell organization and biogenesis, cell growth, cell proliferation, metabolism, cell cycle, budding, cell shape and cell size control, sporulation (sensu Saccharomyces), transport, ion homeostasis, autophagy, cell motility, chemi-mechanical coupling, membrane fusion, cell-cell fusion, and stress response.

Pharmaceutical compositions including such proteins or protein encoding sequences, antibodies directed against such proteins or polynucleotides capable of altering expression of such proteins, may be used to treat or prevent diseases such as cancer, degenerative diseases, for example neurodegenerative diseases or conditions associated with aging, or alternatively, diseases wherein apoptosis which should have taken place, does not take place. Antibodies and polynucleotides such as PCR primers and molecular probes designed to identify such proteins or protein encoding sequences may be used for diagnosis of such diseases, detection of pre-disposition to a disease, and determination of the stage of a disease.

Examples of such diseases include, but are not limited to, ataxia-telangiectasia associated with ataxia-telangiectasia mutated deficiency [Hande et al., (2001) Hum.

Mol. Genet., 10(5):519-28], osteoporosis associated with osteonectin deficiency [Delany et al., (2000) J. Clin. Invest., 105(7):915-23], arthritis caused by membrane-bound matrix metalloproteinase deficiency [Holmbeck et al., (1999) Cell, 99(1):81-92], defective stratum corneum and early neonatal death associated with transglutaminase 1 deficiency [Matsuki et al., (1998) Proc. Natl. Acad. Sci. U S A, 95(3):1044-9], and Alzheimer's disease associated with estrogen [Simpkins et al., (1997) Am. J. Med., 103(3A):19S-25S].

#### Chaperones

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Information derived from proteins such as ribosomal chaperone, peptidylprolyl isomerase, lectin-binding chaperone, nucleosome assembly chaperone, chaperonin ATPase, cochaperone, heat shock protein, HSP70/HSP90 organizing protein, fimbrial chaperone, metallochaperone, tubulin folding, HSC70-interacting protein can be used to diagnose/treat diseases involving pathological conditions, which are associated with non-normal protein activity or structure. Binding of the products of the proteins of this family, or antibodies reactive therewith, can modulate a plurality of protein activities as well as change protein structure. Alternatively, diseases in which there is abnormal degradation of other proteins, which may cause non-normal accumulation of various proteinaceous products in cells, caused non-normal (prolonged or shortened) activity of proteins, etc.

Example of diseases that involve chaperones are cancerous diseases, such as prostate cancer (Semin Oncol. 2003 Oct;30(5):709-16.); infectious diseases, such as prion infection (EMBO J. 2003 Oct 15;22(20):5435-5445.); neurological syndromes (J Neuropathol Exp Neurol. 2003 Jul;62(7):751-64.; Antioxid Redox Signal. 2003 Jun;5(3):337-48.; J Neurochem. 2003 Jul;86(2):394-404.)

# Variants of proteins which accumulate an element/compound

Variant proteins which their wild type version naturally binds a certain compound or element inside the cell for storage of accumulation may have terapoetic effect as secreted variants. Ferritin, accumulates iron inside the cells. A secreted variant of this protein is expected to bind plasma iron, reduce its levels and therefore have a desired therapeutic effect in the syndrome of Hemosiderosis characterized by high levels of iron in the blood.

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# Diseases that may be treated/diagnosed using the biomolecular sequences of the present invention

#### Inflammatory diseases

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Examples of inflammatory diseases include, but are not limited to, chronic inflammatory diseases and acute inflammatory diseases.

### Inflammatory diseases associated with hypersensitivity

Examples of hypersensitivity include, but are not limited to, Types I-IV hypersensitivity, immediate hypersensitivity, antibody mediated hypersensitivity, immune complex mediated hypersensitivity, T lymphocyte mediated hypersensitivity and DTH. An example of type I or immediate hypersensitivity is asthma. Examples of type II hypersensitivity include, but are not limited to, rheumatoid diseases, rheumatoid autoimmune diseases, rheumatoid arthritis [Krenn V. et al., Histol Histopathol 2000 Jul;15 (3):791], spondylitis, ankylosing spondylitis [Jan Voswinkel et al., Arthritis Res 2001; 3 (3): 189], systemic diseases, systemic autoimmune diseases, systemic lupus erythematosus [Erikson J. et al., Immunol Res 1998;17 (1-2):49], sclerosis, systemic sclerosis [Renaudineau Y. et al., Clin Diagn Lab Immunol. 1999 Mar;6 (2):156; Chan OT. et al., Immunol Rev 1999 Jun;169:107], glandular diseases, glandular autoimmune diseases, pancreatic autoimmune diseases, diabetes, Type I diabetes [Zimmet P. Diabetes Res Clin Pract 1996 Oct;34 Suppl:S125], thyroid diseases, autoimmune thyroid diseases, Graves' disease [Orgiazzi J. Endocrinol Metab Clin North Am 2000 Jun;29 (2):339], thyroiditis, spontaneous autoimmune thyroiditis [Braley-Mullen H. and Yu S, J Immunol 2000 Dec 15;165 (12):7262], Hashimoto's thyroiditis [Toyoda N. et al., Nippon Rinsho 1999 Aug; 57 (8):1810], myxedema, idiopathic myxedema [Mitsuma T. Nippon Rinsho. 1999 Aug;57 (8):1759], autoimmune reproductive diseases, ovarian diseases, ovarian autoimmunity [Garza KM. et al., J Reprod Immunol 1998 Feb;37 (2):87], autoimmune anti-sperm infertility [Diekman AB. et al., Am J Reprod Immunol. 2000 Mar;43 (3):134], repeated fetal loss [Tincani A. et al., Lupus 1998;7 Suppl 2:S107-9], neurodegenerative diseases, neurological diseases, neurological autoimmune diseases, multiple sclerosis [Cross AH. et al., J Neuroimmunol 2001 Jan 1;112 (1-2):1], Alzheimer's disease [Oron L. et al., J Neural Transm Suppl. 1997;49:77], myasthenia gravis [Infante AJ. And Kraig E, Int Rev Immunol 1999;18 (1-2):83], motor

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neuropathies [Komberg AJ. J Clin Neurosci. 2000 May;7 (3):191], Guillain-Barre syndrome, neuropathies and autoimmune neuropathies [Kusunoki S. Am J Med Sci. 2000 Apr;319 (4):234], myasthenic diseases, Lambert-Eaton myasthenic syndrome [Takamori M. Am J Med Sci. 2000 Apr;319 (4):204], paraneoplastic neurological diseases, cerebellar atrophy, paraneoplastic cerebellar atrophy, non-paraneoplastic stiff man syndrome, cerebellar atrophies, progressive cerebellar atrophies, encephalitis, Rasmussen's encephalitis, amyotrophic lateral sclerosis, Sydeham chorea, Gilles de la Tourette syndrome, polyendocrinopathies, autoimmune polyendocrinopathies [Antoine JC. and Honnorat J. Rev Neurol (Paris) 2000 Jan; 156 (1):23], neuropathies, dysimmune neuropathies [Nobile-Orazio E. et al., Electroencephalogr Clin Neurophysiol Suppl 1999;50:419], neuromyotonia, acquired neuromyotonia, arthrogryposis multiplex congenita [Vincent A. et al., Ann N Y Acad Sci. 1998 May 13;841:482], cardiovascular diseases, cardiovascular autoimmune diseases, atherosclerosis [Matsuura E. et al., Lupus. 1998;7 Suppl 2:S135], myocardial infarction [Vaarala O. Lupus. 1998;7 Suppl 2:S132], thrombosis [Tincani A. et al., Lupus 1998;7 Suppl 2:S107-9], granulomatosis, Wegener's granulomatosis, arteritis, Takayasu's arteritis and Kawasaki syndrome [Praprotnik S. et al., Wien Klin Wochenschr 2000 Aug 25;112 (15-16):660], anti-factor VIII autoimmune disease [Lacroix-Desmazes S. et al., Semin Thromb Hemost.2000;26 (2):157], vasculitises, necrotizing small vessel vasculitises, microscopic polyangiitis, Churg and Strauss syndrome, glomerulonephritis, pauci-immune focal necrotizing glomerulonephritis, crescentic glomerulonephritis [Noel LH. Ann Med Interne (Paris). 2000 May;151 (3):178], antiphospholipid syndrome [Flamholz R. et al., J Clin Apheresis 1999;14 (4):171], heart failure, agonist-like  $\beta$ -adrenoceptor antibodies in heart failure [Wallukat G. et al., Am J Cardiol. 1999 Jun 17;83 (12A):75H], thrombocytopenic purpura [Moccia F. Ann Ital Med Int. 1999 Apr-Jun;14 (2):114], hemolytic anemia, autoimmune hemolytic anemia [Efremov DG. et al., Leuk Lymphoma 1998 Jan; 28 (3-4):285], gastrointestinal diseases, autoimmune diseases of the gastrointestinal tract, intestinal diseases, chronic inflammatory intestinal disease [Garcia Herola A. et al., Gastroenterol Hepatol. 2000 Jan;23 (1):16], celiac disease [Landau YE. and Shoenfeld Y. Harefuah 2000 Jan 16;138 (2):122], autoimmune diseases of the musculature, myositis, autoimmune myositis, Sjogren's syndrome [Feist E. et al., Int

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Arch Allergy Immunol 2000 Sep;123 (1):92], smooth muscle autoimmune disease [Zauli D. et al., Biomed Pharmacother 1999 Jun;53 (5-6):234], hepatic diseases, hepatic autoimmune diseases, autoimmune hepatitis [Manns MP. J Hepatol 2000 Aug;33 (2):326] and primary biliary cirrhosis [Strassburg CP. et al., Eur J Gastroenterol Hepatol. 1999 Jun;11 (6):595].

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Examples of type IV or T cell mediated hypersensitivity, include, but are not limited to, rheumatoid diseases, rheumatoid arthritis [Tisch R, McDevitt HO. Proc Natl Acad Sci U S A 1994 Jan 18:91 (2):437, systemic diseases, systemic autoimmune diseases, systemic lupus erythematosus [Datta SK., Lupus 1998;7 (9):591], glandular diseases, glandular autoimmune diseases, pancreatic diseases, pancreatic autoimmune diseases, Type 1 diabetes [Castano L. and Eisenbarth GS. Ann. Rev. Immunol. 8:647], thyroid diseases, autoimmune thyroid diseases, Graves' disease [Sakata S. et al., Mol Cell Endocrinol 1993 Mar; 92 (1):77], ovarian diseases [Garza KM. et al., J Reprod Immunol 1998 Feb;37 (2):87], prostatitis, autoimmune prostatitis [Alexander RB. et al., Urology 1997 Dec;50 (6):893], polyglandular syndrome, autoimmune polyglandular syndrome, Type I autoimmune polyglandular syndrome [Hara T. et al., Blood. 1991 Mar 1;77 (5):1127], neurological diseases, autoimmune neurological diseases, multiple sclerosis, neuritis, optic neuritis [Soderstrom M. et al., J Neurol Neurosurg Psychiatry 1994 May;57 (5):544], myasthenia gravis [Oshima M. et al., Eur J Immunol 1990 Dec;20 (12):2563], stiffman syndrome [Hiemstra HS. et al., Proc Natl Acad Sci U S A 2001 Mar 27;98 (7):3988], cardiovascular diseases, cardiac autoimmunity in Chagas' disease [Cunha-Neto E. et al., J Clin Invest 1996 Oct 15;98 (8):1709], autoimmune thrombocytopenic purpura [Semple JW. et al., Blood 1996 May 15;87 (10):4245], anti-helper T lymphocyte autoimmunity [Caporossi AP. et al., Viral Immunol 1998;11 (1):9], hemolytic anemia [Sallah S. et al., Ann Hematol 1997 Mar;74 (3):139], hepatic diseases, hepatic autoimmune diseases, hepatitis, chronic active hepatitis [Franco A. et al., Clin Immunol Immunopathol 1990 Mar;54 (3):382], biliary cirrhosis, primary biliary cirrhosis [Jones DE. Clin Sci (Colch) 1996 Nov;91 (5):551], nephric diseases, nephric autoimmune diseases, nephritis, interstitial nephritis [Kelly CJ. J Am Soc Nephrol 1990 Aug;1 (2):140], connective tissue diseases, ear diseases, autoimmune connective tissue diseases, autoimmune ear disease [Yoo TJ. et al., Cell Immunol

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1994 Aug;157 (1):249], disease of the inner ear [Gloddek B. et al., Ann N Y Acad Sci 1997 Dec 29;830:266], skin diseases, cutaneous diseases, dermal diseases, bullous skin diseases, pemphigus vulgaris, bullous pemphigoid and pemphigus foliaceus.

Examples of delayed type hypersensitivity include, but are not limited to, contact dermatitis and drug eruption.

#### Autoimmune diseases

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Examples of autoimmune diseases include, but are not limited to, cardiovascular diseases, rheumatoid diseases, glandular diseases, gastrointestinal diseases, cutaneous diseases, hepatic diseases, neurological diseases, muscular diseases, nephric diseases, diseases related to reproduction, connective tissue diseases and systemic diseases.

Examples of autoimmune cardiovascular and blood diseases include, but are not limited to atherosclerosis [Matsuura E. et al., Lupus. 1998;7 Suppl 2:S135], myocardial infarction [Vaarala O. Lupus. 1998;7 Suppl 2:S132], thrombosis [Tincani A. et al., Lupus 1998;7 Suppl 2:S107-9], Wegener's granulomatosis, Takayasu's arteritis, Kawasaki syndrome [Praprotnik S. et al., Wien Klin Wochenschr 2000 Aug 25;112 (15-16):660], anti-factor VIII autoimmune disease [Lacroix-Desmazes S. et al., Semin Thromb Hemost.2000;26 (2):157], necrotizing small vessel vasculitis, microscopic polyangiitis, Churg and Strauss syndrome, pauci-immune focal necrotizing and crescentic glomerulonephritis [Noel LH. Ann Med Interne (Paris). 2000 May;151 (3):178], antiphospholipid syndrome [Flamholz R. et al., J Clin Apheresis 1999;14 (4):171], antibody-induced heart failure [Wallukat G. et al., Am J Cardiol. 1999 Jun 17;83 (12A):75H, thrombocytopenic purpura [Moccia F. Ann Ital Med Int. 1999 Apr-Jun;14 (2):114; Semple JW. et al., Blood 1996 May 15;87 (10):4245], autoimmune hemolytic anemia [Efremov DG. et al., Leuk Lymphoma 1998 Jan; 28 (3-4): 285; Sallah S. et al., Ann Hematol 1997 Mar; 74 (3): 139], cardiac autoimmunity in Chagas' disease [Cunha-Neto E. et al., J Clin Invest 1996 Oct 15;98 (8):1709) and anti-helper T lymphocyte autoimmunity [Caporossi AP. et al., Viral Immunol 1998;11 (1):9].

Examples of autoimmune rheumatoid diseases include, but are not limited to rheumatoid arthritis [Krenn V. et al., Histol Histopathol 2000 Jul;15 (3):791; Tisch R,

McDevitt HO. Proc Natl Acad Sci units S A 1994 Jan 18;91 (2):437) and ankylosing spondylitis [Jan Voswinkel et al., Arthritis Res 2001; 3 (3): 189].

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Examples of autoimmune glandular diseases include, but are not limited to, pancreatic disease, Type I diabetes, Type II diabetes, thyroid disease, Graves' disease, thyroiditis, spontaneous autoimmune thyroiditis, Hashimoto's thyroiditis, idiopathic myxedema, ovarian autoimmunity, autoimmune anti-sperm infertility, autoimmune prostatitis and Type I autoimmune polyglandular syndrome. diseases include, but are not limited to autoimmune diseases of the pancreas, Type 1 diabetes [Castano L. and Eisenbarth GS. Ann. Rev. Immunol. 8:647; Zimmet P. Diabetes Res Clin Pract 1996 Oct;34 Suppl:S125], autoimmune thyroid diseases, Graves' disease [Orgiazzi J. Endocrinol Metab Clin North Am 2000 Jun;29 (2):339; Sakata S. et al., Mol Cell Endocrinol 1993 Mar;92 (1):77], spontaneous autoimmune thyroiditis [Braley-Mullen H. and Yu S, J Immunol 2000 Dec 15;165 (12):7262], Hashimoto's thyroiditis [Toyoda N. et al., Nippon Rinsho 1999 Aug;57 (8):1810], idiopathic myxedema [Mitsuma T. Nippon Rinsho. 1999 Aug; 57 (8):1759], ovarian autoimmunity [Garza KM. et al., J Reprod Immunol 1998 Feb;37 (2):87], autoimmune anti-sperm infertility [Diekman AB. et al., Am J Reprod Immunol. 2000 Mar;43 (3):134], autoimmune prostatitis [Alexander RB. et al., Urology 1997 Dec;50 (6):893) and Type I autoimmune polyglandular syndrome [Hara T. et al., Blood. 1991 Mar 1;77 (5):1127].

Examples of autoimmune gastrointestinal diseases include, but are not limited to, chronic inflammatory intestinal diseases [Garcia Herola A. et al., Gastroenterol Hepatol. 2000 Jan;23 (1):16], celiac disease [Landau YE. and Shoenfeld Y. Harefuah 2000 Jan 16;138 (2):122], colitis, ileitis and Crohn's disease and ulcerative colitis.

Examples of autoimmune cutaneous diseases include, but are not limited to, autoimmune bullous skin diseases, such as, but are not limited to, pemphigus vulgaris, bullous pemphigoid and pemphigus foliaceus.

Examples of autoimmune hepatic diseases include, but are not limited to, hepatitis, autoimmune chronic active hepatitis [Franco A. et al., Clin Immunol Immunopathol 1990 Mar;54 (3):382], primary biliary cirrhosis [Jones DE. Clin Sci (Colch) 1996 Nov;91 (5):551; Strassburg CP. et al., Eur J Gastroenterol Hepatol. 1999 Jun;11 (6):595) and autoimmune hepatitis [Manns MP. J Hepatol 2000 Aug;33 (2):326].

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Examples of autoimmune neurological diseases include, but are not limited to, multiple sclerosis [Cross AH. et al., J Neuroimmunol 2001 Jan 1;112 (1-2):1], Alzheimer's disease [Oron L. et al., J Neural Transm Suppl. 1997;49:77], myasthenia gravis [Infante AJ. And Kraig E, Int Rev Immunol 1999;18 (1-2):83; Oshima M. et al., Eur J Immunol 1990 Dec; 20 (12):2563], neuropathies, motor neuropathies [Kornberg AJ. J Clin Neurosci. 2000 May;7 (3):191], Guillain-Barre syndrome and autoimmune neuropathies [Kusunoki S. Am J Med Sci. 2000 Apr;319 (4):234], myasthenia, Lambert-Eaton myasthenic syndrome [Takamori M. Am J Med Sci. 2000 Apr;319 (4):204], paraneoplastic neurological diseases, cerebellar atrophy, paraneoplastic cerebellar atrophy and stiff-man syndrome [Hiemstra HS. et al., Proc Natl Acad Sci units S A 2001 Mar 27;98 (7):3988], non-paraneoplastic stiff man syndrome, progressive cerebellar atrophies, encephalitis, Rasmussen's encephalitis, amyotrophic lateral sclerosis, Sydeham chorea, Gilles de la Tourette syndrome and autoimmune polyendocrinopathies [Antoine JC. and Honnorat J. Rev Neurol (Paris) 2000 Jan;156 (1):23], dysimmune neuropathies [Nobile-Orazio E. et al., Electroencephalogr Clin Neurophysiol Suppl 1999;50:419], acquired neuromyotonia, arthrogryposis multiplex congenita [Vincent A. et al., Ann N Y Acad Sci. 1998 May 13;841:482], neuritis, optic neuritis [Soderstrom M. et al., J Neurol Neurosurg Psychiatry 1994 May;57 (5):544) multiple sclerosis and neurodegenerative diseases.

Examples of autoimmune muscular diseases include, but are not limited to, myositis, autoimmune myositis and primary Sjogren's syndrome [Feist E. et al., Int Arch Allergy Immunol 2000 Sep;123 (1):92) and smooth muscle autoimmune disease [Zauli D. et al., Biomed Pharmacother 1999 Jun;53 (5-6):234].

Examples of autoimmune nephric diseases include, but are not limited to, nephritis and autoimmune interstitial nephritis [Kelly CJ. J Am Soc Nephrol 1990 Aug;1 (2):140], glommerular nephritis.

Examples of autoimmune diseases related to reproduction include, but are not limited to, repeated fetal loss [Tincani A. et al., Lupus 1998;7 Suppl 2:S107-9].

Examples of autoimmune connective tissue diseases include, but are not limited to, ear diseases, autoimmune ear diseases [Yoo TJ. et al., Cell Immunol 1994 Aug;157 (1):249) and autoimmune diseases of the inner ear [Gloddek B. et al., Ann N Y Acad Sci 1997 Dec 29;830:266].

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Examples of autoimmune systemic diseases include, but are not limited to, systemic lupus erythematosus [Erikson J. et al., Immunol Res 1998;17 (1-2):49) and systemic sclerosis [Renaudineau Y. et al., Clin Diagn Lab Immunol. 1999 Mar;6 (2):156; Chan OT. et al., Immunol Rev 1999 Jun;169:107].

#### Infectious diseases

Examples of infectious diseases include, but are not limited to, chronic infectious diseases, subacute infectious diseases, acute infectious diseases, viral diseases, bacterial diseases, protozoan diseases, parasitic diseases, fungal diseases, mycoplasma diseases, and prion diseases.

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## Graft rejection diseases

Examples of diseases associated with transplantation of a graft include, but are not limited to, graft rejection, chronic graft rejection, subacute graft rejection, hyperacute graft rejection, acute graft rejection, and graft versus host disease.

### Allergic diseases

Examples of allergic diseases include, but are not limited to, asthma, hives, urticaria, pollen allergy, dust mite allergy, venom allergy, cosmetics allergy, latex allergy, chemical allergy, drug allergy, insect bite allergy, animal dander allergy, stinging plant allergy, poison ivy allergy and food allergy.

# Cancerous diseases

Examples of cancer include but are not limited to carcinoma, lymphoma, blastoma, sarcoma, and leukemia. Particular examples of cancerous diseases but are not limited to: Myeloid leukemia such as Chronic myelogenous leukemia. Acute myelogenous leukemia with maturation. Acute promyelocytic leukemia, Acute nonlymphocytic leukemia with increased basophils, Acute monocytic leukemia. Acute myelomonocytic leukemia with eosinophilia; malignant lymphoma, such as Birkitt's Non-Hodgkin's; Lymphoctyic leukemia, such as acute lumphoblastic leukemia. Chronic lymphocytic leukemia; Myeloproliferative diseases, such as Solid tumors Benign Meningioma, Mixed tumors of salivary gland, Colonic adenomas; Adenocarcinomas, such as Small cell lung cancer, Kidney, Uterus, Prostate, Bladder, Colon, Sarcomas, Liposarcoma, myxoid, Synovial sarcoma, Rhabdomyosarcoma (alveolar), Extraskeletel myxoid chonodrosarcoma, Ewing's

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tumor; other include Testicular and ovarian dysgerminoma, Retinoblastoma, Wilms' tumor, Neuroblastoma, Malignant melanoma, Mesothelioma, breast, skin, prostate, and ovarian.

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#### **EXAMPLE 9**

# Microarray analysis based validation of the antisense dataset

A microarray-based analysis using oligonucleotide probes that hybridize to the target in a strand-specific manner, was conducted in order to experimentally validate the predicted antisense/sense pairs of the database. Two complementary 60-mer oligonucleotide probes derived from the predicted overlap region of the sense/antisense pairs, were designed. Single 60-mer oligonucleotides were previously shown to offer reliability and sensitivity for detecting specific transcripts (T. R. Hughes, et al., Nature Biotech. 19, 342 (2001).) Initially only pairs of clusters with an overlap greater than 60 bases (2,464 pairs agree with this restriction) were selected for array construction. The overlap region of each antisense pair was then verified for the presence of 60-mer oligonucleotides that matched a set of standards, such as minimal sequence similarity elsewhere in the human genome, uniform GC-content and Tm, and absence of palindromic sequences, in order to maximize the hybridization specificity. Oligonucleotide probes meeting the criteria set forth were identified for 1,211 sense/antisense pairs and a random sample of 264 pairs, which constitutes roughly one-tenth of the original dataset of 2667 sense/antisense cluster pairs, was selected for analysis by Microarrays (Table\_S1 on CD-ROM2, an excerpt of which is shown in Table 5 below). In this sample, the proportion of each of the nine subgroups depicted in Table 4 is similar to that of the original dataset, indicating a good representation of the various subgroups.

Table 4

		7 4010 7		
mRNA/	No cluster	1 cluster	2 clusters	Total
Splicing	w introns	wintron(s)	w intron(s)	
No cluster w mRNA	48	132	197	377 (14%)
1 cluster w mRNA	17	490	1039	1546 (58%)
2 clusters w mRNA	1	85	658	744 (28%)
Total	66 (2.5%)	707 (26%)	1894 (71%)	2667 (100%)

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Table represents the proportion of sense/antisense clusters in the dataset of 2667 that contain: 1) a known mRNA and 2) expressed sequences spanning at least one intron, in one of the two clusters, in both clusters or in none of the clusters.

Table 5 below is an excerpt of Table\_S1 provided on CD-ROM2; Table 5 exemplifies five of the putative sense/antisense pairs that were selected for microarray analysis. The first column provides the pair number. The next two columns provide the accession numbers of representative expressed sequences from the overlapping region of the sense and the antisense genes, respectively. The two columns identified by the "RNA" header provide the accession numbers of known mRNAs in the sense and antisense clusters (if available), and the last two columns provide the GenBank descriptions of these mRNAs.

Table 5

Pair no.	sense seq. from over- lapping region	antisense seq. from overlapping region	RNA in sense cluster	RNA in a-sense cluster	description of RNA in sense cluster	description of RNA in antisense cluster
235	NM_ 6227	NM_ 308	NM_ 6227	NM_ 308	Homo sapiens phospholipid transfer protein (PLTP), mRNA #DV L26232.1	Homo sapiens protective protein for beta-galactosidase (galactosialidosis) (PPGB), mRNA
237	NM_ 4703	NM_ 2532	NM_ 4703	NM_ 2532	Homo sapiens rabaptin-5 (RAB5EP), mRNA #DV X91141.1	Homo sapiens nucleoporin 88kD (NUP88) mRNA #DV Y08612.2
217	NM_ 14885	AV 723808	NM_ 14885	NM_ 2940	Homo sapiens anaphase-promoting complex 10 (APC10) mRNA. #DV AL080090.1	Homo sapiens ATP- binding cassette, sub-family E (OABP), member 1 (ABCE1), mRNA.
209	BC 8865	BG 717574	NM_ 32231	NM_ 3099	Homo sapiens hypothetical protein FLJ22875 (FLJ22875), mRNA	Homo sapiens sorting nexin 1 (SNX1),mRNA. #DV U53225.1
196	BE 885605	AL 527611	NM_ 17832	NM_ 3640	Homo sapiens hypothetical protein FLJ20457 (FLJ20457), mRNA	Homo sapiens inhibitor of kappa light polypeptide gene enhancer in B-cells, kinase complex-associated protein (IKBKAP),mRNA

Table 5 Cont.

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Microarrays were constructed by spotting each of the 264 pairs of oligonucleotide probes onto treated glass slides in quadruplicates. The two counterpart oligonucleotide probes of each pair were spotted next to each other to ensure similar hybridization conditions.

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As positive controls, each of the blocks contained oligonucleotides spotted at various concentrations for four ubiquitously expressed housekeeping genes: guanine nucleotide binding protein beta polypeptide 2-like 1 (gnb211, HUMMHBA123, NM\_006098), heat shock 70kD protein 10 (hsp70, HSHSC70CDS0, NM\_006597), beta actin (actin, ACTB, NM\_001101), and glyceraldehyde-3-phosphate dehydrogenase (gapdh, NM\_002046).

Two random oligonucleotides were used as negative controls. These computer-generated arbitrary sequences displayed no alignment to human genome sequences but had the same physical characteristics as the other oligonucleotide probes. In addition, 22 probes for 11 previously documented sense/antisense pairs were also analyzed in the Microarrays (entries Pair no. "known 1"-"known 11" on Table\_S1 of CD-ROM2).

The Microarrays were hybridized with poly(A)+ RNAs obtained from 19 human cell lines representing a variety of tissues and four normal human tissues (see General Materials and Methods section above). Each poly(A)+ RNA was reverse transcribed by priming with oligo(dT) and random nonamers, and engineered to incorporate a fluorescent marker. A pool containing an equal mix of the RNAs from all cell lines was also transcribed and used as a reference target. The resulting fluorescently-labeled cDNAs were combined and hybridized to the oligonucleotide Microarrays.

The experiments were performed in duplicate and utilized a fluorescent reversal of the Cy3- and Cy5-labelled cDNA. Stringent hybridization conditions were utilized in order to minimize the appearance of false positive signals, despite the possibility of compromised detection of low abundance transcripts.

The raw data was normalized at several levels; within each slide, between reciprocal slides, and globally between slides (see *General Materials and Methods* section above). Non-specific levels of hybridization were estimated from the negative

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controls. The threshold for significant positive signals resulting from authentic hybridization was set at 4 standard deviations of the mean normalized signals for the negative controls. Processed data was presented as normalized signal intensity and as normalized signal ratios (Table S2 on CD-ROM2).

To further substantiate array results, several pairs of oligonucleotides were also utilized in Northern blot analysis. Figures 22a-j illustrate results of such northern blot analysis. Figure 22a reveals expression patterns of randomly selected sequence pair number 235, denoted as Rand\_235 in Table 6, below. Similarly, Figure 22b corresponds to pair number 173, Figure 22c to pair number 248, Figure 22d to pair number 6, Figure 22e to pair number 216, Figure 22f to pair number 239, Figure 22g to pair number 202, Figure 22h to pair number 114, Figure 22i to pair number 188, and Figure 22j to pair number 223. Eight pairs (Figures 22a-h) evaluated revealed positive signals for both sense and antisense expression, while two (Figures 22i-j) revealed a positive signal for only one of the genes, with the counterpart being a known RefSeq mRNA.

Figure 23 represents an excerpt of Table\_S2 (provided in CD-ROM2) which summarizes the results obtained utilizing the array generated according to the teachings of the present invention. Expression thresholds were verified and indicated and normalization for microarray signals was conducted as described above. *Rji* ratios were obtained for each cell line/tissue assessed.

Taken cumulatively, the data presented herein revealed positive signals for both sense and antisense transcripts in 65 cluster pairs. In another 47 cases, significant hybridization signals were detected for antisense sequences with known counterpart sense transcripts, i.e. RefSeq mRNAs, which did not give clear hybridization signals on the Microarrays. Thus, 42.5 % (112 cases) of the 264 represented on the Microarrays, yielded detectable antisense transcription.

The conversion table, assigning the respective serial number as it appears in the "table\_125" file of CD-ROM2 and "table\_133" file of CD-ROM 3 enclosed herewith, is shown in Table 6 below.

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Table 6

Rand_#	Serial No	Rand_#	Serial No	Rand_#	Serial No
Rand_1	2326	Rand_179	3266	Rand_258	3807

Rand_10         3647         Rand_18         3073         Rand_259         2621           Rand_100         2758         Rand_180         1794         Rand_26         4009           Rand_101         1595         Rand_181         1585         Rand_27         3393           Rand_102         3686         Rand_182         3554         Rand_28         3589           Rand_103         2331         Rand_183         3377         Rand_29         1837           Rand_104         3496         Rand_183         3466         Rand_30         3297           Rand_105         3134         Rand_185         3159         Rand_30         3297           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_108         2929         Rand_187         3645         Rand_31         2692           Rand_109         2537         Rand_189         3009         Rand_33         2052           Rand_11         2806         Rand_191         2849         Rand_36         3898           Rand_111         2819         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874 <th></th> <th></th> <th>120</th> <th>5</th> <th></th> <th></th>			120	5		
Rand_101         1595         Rand_181         1585         Rand_27         3393           Rand_102         3686         Rand_182         3554         Rand_28         3589           Rand_103         2331         Rand_183         3377         Rand_29         1837           Rand_104         3496         Rand_184         3466         Rand_3         3046           Rand_105         3134         Rand_185         3159         Rand_30         3297           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_107         908         Rand_188         3880         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_11         2806         Rand_199         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_121         3019         Rand_192         2515	Rand_10	3647	Rand_18	3073	Rand_259	2621
Rand_102         3686         Rand_182         3554         Rand_28         3589           Rand_103         2331         Rand_183         3377         Rand_29         1837           Rand_104         3496         Rand_184         3466         Rand_3         3046           Rand_105         3134         Rand_185         3159         Rand_30         3297           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_107         908         Rand_187         3645         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_32         707 2376           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_38         3092           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_112         3019         Rand_192 <td< td=""><td>Rand_100</td><td>2758</td><td>Rand_180</td><td>1794</td><td>Rand_26</td><td>4009</td></td<>	Rand_100	2758	Rand_180	1794	Rand_26	4009
Rand_103         2331         Rand_183         3377         Rand_29         1837           Rand_104         3496         Rand_184         3466         Rand_3         3046           Rand_105         3134         Rand_185         3159         Rand_30         3297           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_107         908         Rand_187         3645         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_36         3898           Rand_111         2819         Rand_192         2515         Rand_38         3092           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         391	Rand_101	1595	Rand_181	1585	Rand_27	3393
Rand_104         3496         Rand_184         3466         Rand_3         3046           Rand_105         3134         Rand_185         3159         Rand_30         3297           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_107         908         Rand_187         3645         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_11         2806         Rand_199         3641         Rand_33         2052           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_111         2819         Rand_191         2874         Rand_38         3092           Rand_113         3815         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914	Rand_102	3686	Rand_182	3554	Rand_28	3589
Rand_105         3134         Rand_185         3159         Rand_30         3297           Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_107         908         Rand_187         3645         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_111         2806         Rand_189         3009         Rand_34         1904           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_190         2874         Rand_37         1821           Rand_111         2819         Rand_191         2874         Rand_38         3092           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_192         2751         Rand_48         3558           Rand_114         2606         Rand_194         27	Rand_103	2331	Rand_183	3377	Rand_29	1837
Rand_106         1339         Rand_186         1413         Rand_31         3692           Rand_107         908         Rand_187         3645         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_11         2806         Rand_19         3641         Rand_35         3718           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_197         3778<	Rand_104	3496	Rand_184	3466	Rand_3	3046
Rand_107         908         Rand_187         3645         Rand_32         707 2376           Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_110         2806         Rand_199         3641         Rand_35         3718           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_193         3914         Rand_40         2474           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         387	Rand_105	3134	Rand_185	3159	Rand_30	3297
Rand_108         2929         Rand_188         3880         Rand_33         2052           Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_11         2806         Rand_19         3641         Rand_35         3718           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_193         3914         Rand_40         2474           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877 <td>Rand_106</td> <td>1339</td> <td>Rand_186</td> <td>1413</td> <td>Rand_31</td> <td>3692</td>	Rand_106	1339	Rand_186	1413	Rand_31	3692
Rand_109         2537         Rand_189         3009         Rand_34         1904           Rand_11         2806         Rand_19         3641         Rand_35         3718           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_114         2606         Rand_194         2751         Rand_40         2474           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_116         2171         Rand_199         2248         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248	Rand_107	908	Rand_187	3645	Rand_32	707 2376
Rand_11         2806         Rand_19         3641         Rand_35         3718           Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_114         2606         Rand_195         2091         Rand_40         2474           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_116         2171         Rand_196         1966         Rand_41         3668           Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_29         3172	Rand_108	2929	Rand_188	3880	Rand_33	2052
Rand_110         3594         Rand_190         2549         Rand_36         3898           Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_200         2064	Rand_109	2537	Rand_189	3009	Rand_34	1904
Rand_111         2819         Rand_191         2874         Rand_37         1821           Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_118         2802         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_20         2360         Rand_46         3852           Rand_121         2076         Rand_200         2064	Rand_11	2806	Rand_19	3641	Rand_35	3718
Rand_112         3019         Rand_192         2515         Rand_38         3092           Rand_113         3815         Rand_193         3914         Rand_39         3262           Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_198         3877         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_200         2064         Rand_47         3096           Rand_121         2076         Rand_201         3597	Rand_110	3594	Rand_190	2549	Rand_36	3898
Rand_113 3815 Rand_193 3914 Rand_39 3262 Rand_114 2606 Rand_194 2751 Rand_4 3558 Rand_115 1662 Rand_195 2091 Rand_40 2474 Rand_116 2171 Rand_196 1966 Rand_41 3568 Rand_117 2539 Rand_197 3778 Rand_42 864 Rand_118 2802 Rand_198 3877 Rand_43 1864 Rand_119 2761 Rand_199 2248 Rand_44 3045 Rand_119 2761 Rand_2 3172 Rand_45 2854 Rand_12 1947 Rand_2 3172 Rand_45 2854 Rand_120 3228 Rand_20 2360 Rand_46 3852 Rand_121 2076 Rand_20 2064 Rand_47 3096 Rand_121 2076 Rand_201 3597 Rand_48 1987 Rand_122 1835 Rand_201 3597 Rand_48 1987 Rand_123 3029 Rand_202 2826 Rand_49 2893 Rand_124 2898 Rand_203 2388 Rand_5 2060 Rand_125 1568 Rand_204 3889 Rand_5 2060 Rand_126 2456 Rand_205 2211 Rand_51 3560 Rand_127 2019 Rand_206 3512 Rand_51 3560 Rand_128 2346 Rand_207 3452 Rand_53 3397 Rand_129 2460 Rand_208 3886 Rand_54 2040 Rand_13 2429 Rand_208 1600 Rand_55 3784 Rand_130 3374 Rand_21 2952 Rand_57 2005 2688	Rand_111	2819	Rand_191	2874	Rand_37	1821
Rand_114         2606         Rand_194         2751         Rand_4         3558           Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_12         1947         Rand_2         2360         Rand_46         3852           Rand_120         3228         Rand_200         2064         Rand_47         3096           Rand_121         2076         Rand_201         3597         Rand_48         1987           Rand_123         3029         Rand_202         2826         Rand_49         2893           Rand_124         2898         Rand_203         2388	Rand_112	3019	Rand_192	2515	Rand_38	3092
Rand_115         1662         Rand_195         2091         Rand_40         2474           Rand_116         2171         Rand_196         1966         Rand_41         3568           Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_20         2360         Rand_46         3852           Rand_121         2076         Rand_200         2064         Rand_47         3096           Rand_121         2076         Rand_201         3597         Rand_48         1987           Rand_123         3029         Rand_202         2826         Rand_49         2893           Rand_124         2898         Rand_203         2388	Rand_113	3815	Rand_193	3914	Rand_39	3262
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Rand_117         2539         Rand_197         3778         Rand_42         864           Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_20         2360         Rand_46         3852           Rand_121         2076         Rand_200         2064         Rand_47         3096           Rand_121         2076         Rand_201         3597         Rand_48         1987           Rand_122         1835         Rand_201         3597         Rand_48         1987           Rand_123         3029         Rand_202         2826         Rand_49         2893           Rand_124         2898         Rand_203         2388         Rand_5         2060           Rand_125         1568         Rand_204         3889         Rand_50         1058           Rand_126         2456         Rand_205         2211         Rand_51         3560           Rand_127         2019         Rand_206         3512	Rand_115	1662	Rand_195	2091	Rand_40	2474
Rand_118         2802         Rand_198         3877         Rand_43         1864           Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_20         2360         Rand_46         3852           Rand_121         2076         Rand_200         2064         Rand_47         3096           Rand_121         1835         Rand_201         3597         Rand_48         1987           Rand_123         3029         Rand_202         2826         Rand_49         2893           Rand_124         2898         Rand_203         2388         Rand_5         2060           Rand_124         2898         Rand_204         3889         Rand_50         1058           Rand_125         1568         Rand_204         3889         Rand_50         1058           Rand_126         2456         Rand_205         2211         Rand_51         3560           Rand_127         2019         Rand_206         3512         Rand_52         2604           Rand_128         2346         Rand_207         3452	Rand_116	2171	Rand_196	1966	Rand_41	3568
Rand_119         2761         Rand_199         2248         Rand_44         3045           Rand_12         1947         Rand_2         3172         Rand_45         2854           Rand_120         3228         Rand_20         2360         Rand_46         3852           Rand_121         2076         Rand_200         2064         Rand_47         3096           Rand_121         1835         Rand_201         3597         Rand_48         1987           Rand_123         3029         Rand_202         2826         Rand_49         2893           Rand_124         2898         Rand_203         2388         Rand_5         2060           Rand_124         2898         Rand_204         3889         Rand_50         1058           Rand_125         1568         Rand_204         3889         Rand_50         1058           Rand_126         2456         Rand_205         2211         Rand_51         3560           Rand_127         2019         Rand_206         3512         Rand_52         2604           Rand_128         2346         Rand_207         3452         Rand_53         3397           Rand_129         2460         Rand_208         3886	Rand_117	2539	Rand_197	3778	Rand_42	864
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Rand_120         3228         Rand_20         2360         Rand_46         3852           Rand_121         2076         Rand_200         2064         Rand_47         3096           Rand_122         1835         Rand_201         3597         Rand_48         1987           Rand_123         3029         Rand_202         2826         Rand_49         2893           Rand_124         2898         Rand_203         2388         Rand_5         2060           Rand_125         1568         Rand_204         3889         Rand_50         1058           Rand_126         2456         Rand_205         2211         Rand_51         3560           Rand_127         2019         Rand_206         3512         Rand_52         2604           Rand_128         2346         Rand_207         3452         Rand_53         3397           Rand_129         2460         Rand_208         3886         Rand_54         2040           Rand_13         2429         Rand_209         1600         Rand_55         3784           Rand_130         3374         Rand_21         2952         Rand_56         3659           Rand_131         3292         Rand_210         2432	Rand_119	2761	Rand_199	2248	Rand_44	3045
Rand_121       2076       Rand_200       2064       Rand_47       3096         Rand_122       1835       Rand_201       3597       Rand_48       1987         Rand_123       3029       Rand_202       2826       Rand_49       2893         Rand_124       2898       Rand_203       2388       Rand_5       2060         Rand_125       1568       Rand_204       3889       Rand_50       1058         Rand_126       2456       Rand_205       2211       Rand_51       3560         Rand_127       2019       Rand_206       3512       Rand_52       2604         Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_12	1947	Rand_2	3172	Rand_45	2854
Rand_122       1835       Rand_201       3597       Rand_48       1987         Rand_123       3029       Rand_202       2826       Rand_49       2893         Rand_124       2898       Rand_203       2388       Rand_5       2060         Rand_125       1568       Rand_204       3889       Rand_50       1058         Rand_126       2456       Rand_205       2211       Rand_51       3560         Rand_127       2019       Rand_206       3512       Rand_52       2604         Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_120	3228	Rand_20	2360	Rand_46	3852
Rand_123       3029       Rand_202       2826       Rand_49       2893         Rand_124       2898       Rand_203       2388       Rand_5       2060         Rand_125       1568       Rand_204       3889       Rand_50       1058         Rand_126       2456       Rand_205       2211       Rand_51       3560         Rand_127       2019       Rand_206       3512       Rand_52       2604         Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_121	2076	Rand_200	2064	Rand_47	3096
Rand_124       2898       Rand_203       2388       Rand_5       2060         Rand_125       1568       Rand_204       3889       Rand_50       1058         Rand_126       2456       Rand_205       2211       Rand_51       3560         Rand_127       2019       Rand_206       3512       Rand_52       2604         Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_122	1835	Rand_201	3597	Rand_48	1987
Rand_125       1568       Rand_204       3889       Rand_50       1058         Rand_126       2456       Rand_205       2211       Rand_51       3560         Rand_127       2019       Rand_206       3512       Rand_52       2604         Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_123	3029	Rand_202	2826	Rand_49	2893
Rand_126       2456       Rand_205       2211       Rand_51       3560         Rand_127       2019       Rand_206       3512       Rand_52       2604         Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_124	2898	Rand_203	2388	Rand_5	2060
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Rand_128       2346       Rand_207       3452       Rand_53       3397         Rand_129       2460       Rand_208       3886       Rand_54       2040         Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_126	2456	Rand_205	2211	Rand_51	3560
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Rand_13       2429       Rand_209       1600       Rand_55       3784         Rand_130       3374       Rand_21       2952       Rand_56       3659         Rand_131       3292       Rand_210       2432       Rand_57       2005 2688	Rand_128	2346	Rand_207	3452	Rand_53	3397
Rand_130 3374 Rand_21 2952 Rand_56 3659 Rand_131 3292 Rand_210 2432 Rand_57 2005 2688	Rand_129	2460	Rand_208	3886	Rand_54	2040
Rand_131 3292 Rand_210 2432 Rand_57 2005 2688	Rand_13	2429	Rand_209	1600	Rand_55	3784
	Rand_130	3374	Rand_21	2952	Rand_56	3659
Rand_132   3259   Rand_211   1651 3968   Rand_58   3187	Rand_131	3292	Rand_210	2432	Rand_57	2005 2688
	Rand_132	3259	Rand_211	1651 3968	Rand_58	3187

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Rand_133	3591	Rand_212	3074	Rand_59	1350
Rand_134	3340	Rand_213	2341	Rand_6	2202
Rand_135	1958	Rand_214	1984	Rand_60	3183
Rand_136	2274	Rand_215	2803	Rand_61	2275
Rand_137	3527	Rand_216	3806	Rand_62	3882
Rand_138	1533	Rand_217	2186	Rand_63	1044 3899
Rand_139	2622	Rand_218	857	Rand_64	2811
Rand_14	2058	Rand_219	1744	Rand_65	3232
Rand_140	2578	Rand_22	2285	Rand_66	3242
Rand_141	3492	Rand_220	2977	Rand_67	34 112 2727
Rand_142	3928	Rand_221	3863	Rand_68	3909
Rand_143	2282 3790	Rand_222	2846	Rand_69	4016
Rand_144	2820	Rand_223	3986	Rand_7	2337
Rand_145	1329	Rand_224	579 3688	Rand_70	2101 3707
Rand_146	1783	Rand_225	3984	Rand_71	3703
Rand_147	1527	Rand_226	2889	Rand_72	3477
Rand_148	2662	Rand_227	3869	Rand_73	2437
Rand_149	2031	Rand_228	3994	Rand_74	3808
Rand_15	2677	Rand_229	3818	Rand_75	3905
Rand_150	1303 1659	Rand_23	3890	Rand_76	1138 2194
Rand_151	1767	Rand_230	3152	Rand_77	819
Rand_152	3378	Rand_231	3445	Rand_78	3704
Rand_153	984	Rand_232	3663	Rand_79	2309
Rand_154	3759	Rand_233	3410	Rand_8	3441
Rand_155	2046	Rand_234	1112	Rand_80	1219
Rand_156	2528	Rand_235	3918	Rand_81	1416
Rand_157	283 1798 2048	Rand_236	2316	Rand_82	1543
Rand_158	3710	Rand_237	3673	Rand_83	3269
Rand_159	3178	Rand_238	3990	Rand_84	532 732
Rand_16	3336	Rand_239	4012	Rand_85	2607
Rand_160	1645	Rand_24	3250	Rand_86	1867
Rand_161	2074 3464	Rand_240	2932	Rand_87	627 3006
Rand_162	3436	Rand_241	3836	Rand_88	2068
Rand_163	2738	Rand_242	3424	Rand_89	2296
Rand_164	2749	Rand_243	3982	Rand_9	3741
Rand_165	2206	Rand_244	3472	Rand_90	1076
Rand_166	1349	Rand_245	2071	Rand_91	3385
	J	1	<u> </u>	<del></del>	<del></del>

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Rand_167	2773	Rand_246	3904	Rand_92	2334
Rand_168	3305	Rand_247	2056	Rand_93	2833
Rand_169	1954	Rand_248	3855	Rand_94	2626
Rand_17	3940	Rand_249	2980	Rand_95	3671
Rand_170	2813	Rand_25	3453	Rand_96	1923
Rand_171	3868	Rand_250	3565	Rand_97	1863
Rand_172	762 1424 3942	Rand_251	2459	Rand_98	3437
Rand_173	3872	Rand_252	71 3147	Rand_99	3469
Rand_174	3801	Rand_253	3967	Rand_260	1975 3171
Rand_175	2547	Rand_254	702 2867 3088	Rand_261	4013
Rand_176	1251	Rand_255	3156	Rand_262	2418
Rand_177	1603	Rand_256	2324 2998	Rand_263	2451
Rand_178	2769	Rand_257	2284	Rand_264	3832

Table 6 Cont

Rand # = the name of the pair on the chip as it appears in Table\_S2 on CD-ROM2, column "Probe"; Serial No = no of the pair in the Table files on CD-ROMS 2 and 3 (could be more than one in case the antisense event was separated to more than two contigs).

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The sensitivity of the experimental approach utilized, i.e. the ability to detect a given transcript, stems from a combination of the stringency used in the microarray analysis and the level of expression and tissue specificity of the RNA. This can be estimated from the positive signals obtained for 65% of the oligos representing known RefSeq mRNAs on the Microarrays. This level of detection is comparable to that obtained in other studies, such as the 58% of known exons verified using microarray analysis (D. D. Shoemaker, et al., Nature 409, 922; 2001).

Thus, the present methodology provides a level of detection for a pair of genes that is  $0.65 \times 0.65 = 0.42$ , a value supported by the detection of positive signals for both sense and antisense expression in 5 out of 11 (0.45) clusters of previously described sense/antisense pairs (Table\_S2 on CD-ROM2).

Of the 264 cluster pairs analyzed in the Microarrays of the present invention, 65 clusters (0.25) showed significant signals for both sense and antisense transcripts, which is 60% of the proposed level of detection for a pair of genes (0.25/0.42).

Extrapolating this figure to the predicted antisense dataset of 2667 clusters, predicts at least 1600 sense/antisense transcriptional units in the human genome.

# 129 **EXAMPLE 10**

# Annotation of newly uncovered naturally occurring antisense transcripts

Newly uncovered naturally occurring transcripts were annotated using the Gencarta (Compugen, Tel-Aviv, Israel) platform. The Gencarta platform includes a rich pool of annotations, sequence information (particularly of spliced sequences), chromosomal information, alignments, and additional information such as SNPs, gene ontology terms, expression profiles, functional analyses, detailed domain structures, known and predicted proteins and detailed homology reports.

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Brief description of the methodology used to obtain annotative sequence information is summarized infra (for detailed description see U.S. Pat. Appl. 10/426,002).

The ontological annotation approach - An ontology refers to the body of knowledge in a specific knowledge domain or discipline such as molecular biology, microbiology, immunology, virology, plant sciences, pharmaceutical chemistry, medicine, neurology, endocrinology, genetics, ecology, genomics, proteomics, cheminformatics, pharmacogenomics, bioinformatics, computer sciences, statistics, mathematics, chemistry, physics and artificial intelligence.

An ontology includes domain-specific concepts – referred to, herein, as sub-ontologies. A sub-ontology may be classified into smaller and narrower categories. The ontological annotation approach is effected as follows.

First, biomolecular (i.e., polynucleotide or polypeptide) sequences are computationally clustered according to a progressive homology range, thereby generating a plurality of clusters each being of a predetermined homology of the homology range.

Progressive homology is used to identify meaningful homologies among biomolecular sequences and to thereby assign new ontological annotations to sequences, which share requisite levels of homologies. Essentially, a biomolecular sequence is assigned to a specific cluster if displays a predetermined homology to at least one member of the cluster (i.e., single linkage). A "progressive homology range" refers to a range of homology thresholds, which progress via predetermined increments from a low homology level (e.g. 35 %) to a high homology level (e.g. 99 %).

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Following generation of clusters, one or more ontologies are assigned to each cluster. Ontologies are derived from an annotation preassociated with at least one biomolecular sequence of each cluster; and/or generated by analyzing (e.g., textmining) at least one biomolecular sequence of each cluster thereby annotating biomolecular sequences.

The hierarchical annotation approach - "Hierarchical annotation" refers to any ontology and subontology, which can be hierarchically ordered, such as, a tissue expression hierarchy, a developmental expression hierarchy, a pathological expression hierarchy, a cellular expression hierarchy, an intracellular expression hierarchy, a taxonomical hierarchy, a functional hierarchy and so forth.

The hierarchical annotation approach is effected as follows.

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First, a dendrogram representing the hierarchy of interest is computationally constructed. A "dendrogram" refers to a branching diagram containing multiple nodes and representing a hierarchy of categories based on degree of similarity or number of shared characteristics.

Each of the multiple nodes of the dendrogram is annotated by at least one keyword describing the node, and enabling literature and database text mining, such as by using publicly available text mining software. A list of keywords can be obtained from the GO Consortium (<a href="www.geneontlogy.org">www.geneontlogy.org</a>). However, measures are taken to include as many keywords, and to include keywords which might be out of date. For example, for tissue annotation, a hierarchy is built using all available tissue/libraries sources available in the GenBank, while considering the following parameters: ignoring GenBank synonyms, building anatomical hierarchies, enabling flexible distinction between tissue types (normal versus pathology) and tissue classification levels (organs, systems, cell types, etc.).

In a second step, each of the biomolecular sequences is assigned to at least one specific node of the dendrogram.

The biomolecular sequences can be annotated biomolecular sequences, unannotated biomolecular sequences or partially annotated biomolecular sequences.

Annotated biomolecular sequences can be retrieved from pre-existing annotated databases as described hereinabove.

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For example, in GenBank, relevant annotational information is provided in the definition and keyword fields. In this case, classification of the annotated biomolecular sequences to the dendrogram nodes is directly effected. A search for suitable annotated biomolecular sequences is performed using a set of keywords which are designed to classify the biomolecular sequences to the hierarchy (i.e., same keywords that populate the dendrogram)

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In cases where the biomolecular sequences are unannotated or partially annotated, extraction of additional annotational information is effected prior to classification to dendrogram nodes. This can be effected by sequence alignment, as described hereinabove. Alternatively, annotational information can be predicted from structural studies. Where needed, nucleic acid sequences can be transformed to amino acid sequences to thereby enable more accurate annotational prediction.

Finally, each of the assigned biomolecular sequences is recursively classified to nodes hierarchically higher than the specific nodes, such that the root node of the dendrogram encompasses the full biomolecular sequence set, which can be classified according to a certain hierarchy, while the offspring of any node represent a partitioning of the parent set.

For example, a biomolecular sequence found to be specifically expressed in "rhabdomyosarcoma", will be classified also to a higher hierarchy level, which is "sarcoma", and then to "Mesenchimal cell tumors" and finally to a highest hierarchy level "Tumor". In another example, a sequence found to be differentially expressed in endometrium cells, will be classified also to a higher hierarchy level, which is "uterus", and then to "women genital system" and to "genital system" and finally to a highest hierarchy level "genitourinary system". The retrieval can be performed according to each one of the requested levels.

Annotating gene expression according to relative abundance - Spatial and temporal gene annotations are also assigned by comparing relative abundance in libraries of different origins. This approach can be used to find gene which are differentially expressed in tissues, pathologies and different developmental stages. In principal, the presentation of a contig in at least two tissues of interest is determined and significant over or under representation of the contig in one of the at least two

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tissues is assessed to identify differential expression. Significant over or under representation is analyzed by statistical pairing.

Annotating spatial and temporal expression can also be effected on splice variants. This is effected as follows. First, a contigue which includes exonal sequence presentation of the at least two splice variants of the gene of interest is obtained. This contigue is assembled from a plurality of expressed sequences;

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Then, at least one contigue sequence region unique to a portion (i.e., at least one and not all) of the at least two splice variants of the gene of interestis identified. Identification of such unique sequence region is effected using computer alignment software.

Finally, the number of the plurality of expressed sequences in the tissue having the at least one contigue sequence region is compared with the number of the plurality of expressed sequences not-having the at least one contigue sequence region, to thereby compare the expression level of the at least two splice variants of the gene of interest in the tissue.

Sequence anntotations obtained using the above-described methodologies and other approaches are disclosed in a data table in the pep\_seqs\_133 of the enclosed CD-ROM3.

The data table shows a collection of annotations for biomolecular sequences, which were identified according to the teachings of the present invention using transcript data based on GenBank versions 136.

Each feature in the data table is identified by "#".

#INDICATION – This field designates the indications (i.e., diseases, disorders, pathological conditions) and therapies that the polypeptide of the present invention can be utilized for. Specifically, an indication lists the disorders or diseases in which the polypeptide of the present invention can be clinically used. A therapy describes a postulated mode of action of the polypeptide for the above-mentioned indication. For example, an indication can be "Cancer, general" while the therapy will be "Anticancer".

Each protein was assigned a SWISSPROT and/or TremBl human protein accession as described in section "Assignment of Swissprot/TremBl accessions to Gencarta contigs" hereinbelow. The information contained in this field is the

indication concatenated to the therapies that were accumulated for the SWISSPROT and/or TremBl human protein from drug databases, such as PharmaProject (PJB Publications Ltd 2003 www.pjbpubs.com/cms.asp?pageid=340) and public databases, such as LocusLink (<a href="www.genelynx.org/cgi-bin/resource?res=locuslink">www.genelynx.org/cgi-bin/resource?res=locuslink</a>) and Swissprot (http://www.ebi.ac.uk/swissprot/index.html). The field may comprise more than one term wherein a ";" separates each adjacent terms.

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Example- #INDICATION Alopecia, general; Antianginal; Anticancer, immunological; Anticancer, other; Atherosclerosis; Buerger's syndrome; Cancer, general; Cancer, head and neck; Cancer, renal; Cardiovascular; Cirrhosis, hepatic; Cognition enhancer; Dermatological; Fibrosis, pulmonary; Gene therapy; Hepatic dysfunction, general; Hepatoprotective; Hypolipaemic/Antiatherosclerosis; Infarction, cerebral; Neuroprotective; Ophthalmological; Peripheral vascular disease; Radio/chemoprotective; Recombinant growth factor; Respiratory; Retinopathy, diabetic; Symptomatic antidiabetic; Urological;

Assignment of Swissprot/TremBl accessions to Gencarta contigs - Gencarta contigs were assigned a Swissprot/TremBl human accession as follows. Swissprot/TremBl data were parsed and for each Swissprot/TremBl accession (excluding Swissprot/TremBl that are annotated as partial or fragment proteins) cross-references to EMBL and Genbank were parsed. The alignment quality of the Swissprot/TremBl protein to their assigned mRNA sequences was checked by frame+p2n alignment analysis. A good alignment was considered as heving the following properties:

- For partial mRNAs (those that in the mRNA description have the phrase "partial cds" or annotated as "3" or "5")- an overall identity of 97% and coverage of 80 % of the Swissprot/TremBl protein.
- All the rest were considered as full coding mRNAs and for them an overall identity of 97% identity and coverage of the Swissprot/TremBl protein of over 95 %.

The mRNAs were searched in the LEADS database for their corresponding contigs, and the contigs that included these mRNA sequences were assigned the Swissprot/TremBl accession.

#PHARM- This field indicates possible pharmacological activities of the polypeptide. Each polypeptide was assigned with a SWISSPROT and/or TremBl human protein accession, as described above. The information contained in this field is the indication concatenated to the therapies that were accumulated for the SWISSPROT and/or TremBl human protein from drug databases such as PharmaProject (PJB Publications Ltd 2003 www.pjbpubs.com/cms.asp?pageid=340) and public databases, such as LocusLink and Swissprot. Note that in some cases this field can include opposite terms in cases where the protein can have contradicting activities such as:

(i) 10 Stimulant – inhibitor;

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- (ii) Agonist – antagonist;
- (iii) Activator-inhibitor;
- (iv) Immunosuppressant – Immunostimulant;

In these cases the pharmacology was indicated as "modulator". For example, if the predicted polypeptide has potential agonistics/antagonistic effects (e.g. Fibroblast growth factor agonist and Fibroblast growth factor antagonist) then the annotation for this code will be "Fibroblast growth factor modulator"

A documentated example for such contradicing activities has been described for the soluble tumor necrosis factor receptors [Mohler et al., J. Immunology 151, 1548-1561]. Essentially, Mohler and co-workers showed that soluble receptor can act both as a carrier of TNF (i.e., agonistic effect) and as an antagonist of TNF activity.

#THERAPEUTIC PROTEIN - This field predicts a therapeutic role for a protein represented by the contig. A contig was assigned this field if there was information in the drug database or the public databases (e.g., described hereinabove) that this protein, or part thereof, is used or can be used as a drug. This field is accompanied by the swissprot accession of the therapeutic protein which this contig most likely represents. Example: # THERAPEUTIC\_PROTEIN UROK\_HUMAN

GO annotations were predicted as described in "The ontological annotation approach" section hereinabove. Functional annotations of transcripts based on Gene Ontology (GO) are indicated by the following format.

\*, \*\* "#GO\_P", annotations related to Biological Process.

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- \*, \*\* "#GO\_F", annotations related to Molecular Function, and
- \*, \*\* "#GO C", annotations related to Cellular Component.

Proloc was used for protein subcellular localization prediction that assigns GO cellular component annotation to the protein. The localization terms were assigned with GO entries.

Cellular localization — ProLoc software, commercially available from Compugen LTD, was used to predict the cellular localization of the proteins. Two main approaches were used: (i) the presence of known extracellular domain/s in a protein; (ii) calculating putative transmembrane segments, if any, in the protein and calculating 2 p-values for the existence of a signal peptide. The latter is done by a searching for a signal peptide at the N-terminal sequence of the protein generating a score. Running the program on real signal peptides and on N-terminal protein sequences that lack a signal peptide resulted in 2 score distributions: the first is the score distribution of the real signal peptides and the second is the score distribution of the N-terminal protein sequences that lack the signal peptide. Given a novel protein product, ProLoc calculates the above-score score and provides the percentage of the scores that are higher than the current score, in the first distribution, as a first p-value (lower p-values mean more reliable signal peptide prediction) and the percentage of the scores that are lower than the current score, in the second distribution, as a second p-value (lower p-values mean more reliable non signal peptide prediction).

Thus, using this algorithm secreted proteins and membrane proteins can be identified, for example. However, proteins which lack signal peptide while are still secreted (such as after lysis of viral infected cells) can be identified such as by homology search to extracellular proteins which were identified as such by ProLoc.

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Table 7

Iable /			
Bombesin-like peptide			
Calcitonin-like			
Gastrin/cholecystokinin peptide hormone			
Glucagon/GIP/secretin/VIP			
Gonadotropin, beta chain			
Insulin/IGF/relaxin			
Natriuretic peptide			
Pancreatic hormone			
Somatotropin hormone			
Tachykinin/Neurokinin			
	Calcitonin-like Gastrin/cholecystokinin peptide hormone Glucagon/GIP/secretin/VIP Gonadotropin, beta chain Insulin/IGF/relaxin Natriuretic peptide Pancreatic hormone Somatotropin hormone		

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IPR006081	Alpha defensin
IPR001928	Endothelin-like toxin
IPR001415	Parathyroid hormone
IPR001400	Somatotropin hormone
IPR001990	Chromogranin/secretogranin
IPR001819	Chromogranin A/B
IPR002012	Gonadotropin-releasing hormone
IPR001152	Thymosin beta-4
IPR000187	Corticotropin-releasing factor, CRF
IPR001545	Gonadotropin, beta chain
IPR000476	Glycoprotein hormones alpha chain
IPR000476	Glycoprotein hormones alpha chain
IPR001323	Erythropoietin/thrombopoeitin
IPR001894	Cathelicidin
IPR001894	Cathelicidin
IPR001483	Urotensin II
IPR006024	Opioid neuropeptide precursor
IPR000020	Anaphylatoxin/fibulin
IPR000074	Apolipoprotein A1/A4/E
IPR001073	Complement C1q protein
IPR000117	Kappa casein
IPR001588	Casein, alpha/beta
IPR001855	Beta defensin
IPR001651	Gastrin/cholecystokinin peptide hormone
IPR000867	Insulin-like growth factor-binding protein, IGFBP
IPR001811	Small chemokine, interleukin-8 like
IPR004825	Insulin/IGF/relaxin
IPR002350	Serine protease inhibitor, Kazal type
IPR000001	Kringle
IPR002072	Nerve growth factor
IPR001839	Transforming growth factor beta (TGFb)
IPR001111	Transforming growth factor beta (TGFb), N-terminal
IPR001820	Tissue inhibitor of metalloproteinase
IPR000264	Serum albumin family
IPR005817	Wnt superfamily

For each category the following features are optionally addressed:

"#GO\_Acc" represents the accession number of the assigned GO entry, corresponding to the following "#GO\_Desc" field.

"#GO\_Desc" represents the description of the assigned GO entry, corresponding to the mentioned "#GO\_Acc" field.

"#CL" represents the confidence level of the GO assignment, when #CL1 is the highest and #CL5 is the lowest possible confidence level. This field appears only when the GO assignment is based on a Swissprot/TremBl protein accession or Interpro accession and (not on Proloc predictions or viral proteins predictions). Preliminary confidence levels were calculated for all public proteins as follows:

PCL 1: a public protein that has a curated GO annotation,

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PCL 2: a public protein that has over 85 % identity to a public protein with a curated GO annotation,

PCL 3: a public protein that exhibits 50 - 85 % identity to a public protein with a curated GO annotation,

PCL 4: a public protein that has under 50 % identity to a public protein with a curated GO annotation.

For each protein a homology search against all public proteins was done. If the protein has over 95 % identity to a public protein with PCL X then the protein gets the same confidence level as the public protein. This confidence level is marked as "#CL X". If the protein has over 85 % identity but not over 95 % to a public protein with PCL X than the protein gets a confidence level lower by 1 than the confidence level of the public protein. If the protein has over 70 % identity but not over 85 % to a public protein with PCL X than the protein gets a confidence level lower by 2 than the confidence level of the public protein. If the protein has over 50 % identity but not over 70 % to a public protein with PCL X than the protein gets a confidence level lower by 3 than the confidence level of the public protein. If the protein has over 30 % identity but not over 50 % to a public protein with PCL X than the protein gets a confidence level lower by 4 than the confidence level of the public protein.

A protein may get confidence level of 2 also if it has a true interpro domain that is linked to a GO annotation <a href="www.geneontology.org/external2go/interpro2go/">www.geneontology.org/external2go/interpro2go/</a>.

When the confidence level is above "1", GO annotations of higher levels of the GO hierarchy are assigned (e.g. for "#CL 3" the GO annotations provided, is as appears plus the 2 GO annotations above it in the hierarchy).

"#DB" marks the database on which the GO assignment relies on. The "sp", relates to SwissProt/TremBl Protein knowledgebase, available from www.expasy.ch/sprot/. "InterPro", refers to the InterPro combined database. available from www.ebi.ac.uk/interpro/, which contains information regarding protein families, collected from the following databases: SwissProt (http://www.ebi.ac.uk/swissprot/), Prosite (http://www.expasy.ch/prosite/), Pfam

(www.sanger.ac.uk/Software/Pfam/),

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**Prints** 

(www.bioinf.man.ac.uk/dbbrowser/PRINTS/),

Prodom

(prodes.toulouse.inra.fr/prodom/), Smart (http://smart.embl-heidelberg.de/) and Tigrfams (http://www.tigr.org/TIGRFAMs/). "Proloc statistical database"- meaning the statistics Proloc uses for predicting the subcellulat localization of a protein.

"#EN" represents the accession of the entity in the database (#DB), corresponding to the accession of the protein/domain why the GO was predicted. If the GO assignment is based on a protein from the SwissProt/TremBl Protein database this field will have the locus name of the protein. Examples, "#DB sp #EN NRG2\_HUMAN" means that the GO assignment in this case was based on a protein from the SwissProt/Trembl database, while the closest homologue (that has a GO assignment) to the assigned protein is depicted in SwissProt entry "NRG2\_HUMAN "#DB interpro #EN IPR001609" means that GO assignment in this case was based on InterPro database, and the protein had an Interpro domain, IPR001609, that the assigned GO was based on. In Proloc predictions this field will have a Proloc annotation "#EN Proloc". In predictions based on viral proteins this field will have the gi. viral protein accession, "#EN 1491997".

#GENE\_SYMBOL – for each Gencarta contig a HUGO gene symbol was assigned in two ways:

- (i) After assigning a Swissprot/TremBl protein to each contig (see Assignment of Swissprot/TremBl accessions to Gencarta contigs) all the gene symbols that appear for the Swissprot entry were parsed and added as a Gene symbol annotation to the gene.
- (ii) LocusLink information- LocusLink was downloaded from NCBI <a href="mailto:ftp.ncbi.nih.gov/refseq/LocusLink/">ftp.ncbi.nih.gov/refseq/LocusLink/</a> (files loc2acc, loc2ref, and LL.out\_hs). The data was integrated producing a file containing the gene symbol for every sequence. Gencarta contigs were assigned a gene symbol if they contain a sequence from this file that has a gene symbol

Example: #GENE SYMBOL MMP15

#DIAGNOSTICS- secreted/membranal proteins get an annotation of "can be used as diagnostic markers for" for the list of indications as appearing in the # INDICATION field, described hereinabove. All proteins that were identified as

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secreted or membranal proteins (as described in the GO field section) will be assigned with this field.

In addition, known Gencarta contigs representing known diagnostic markers (such as listed in Table 8, below) and all transcripts and proteins deriving from this contig will be assigned to this field and will get the above mentioned annotation followed by "as indicated in the Diagnostic markers table".

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Table 8

Enzymes		
Test	Gencarta Contig	Comments
GPT	R35137 (GPT glutamic-pyruvate transaminase (alanine aminotransferase)) Z24841 (GPT2 glutamic pyruvate transaminase (alanine aminotransferase) 2)	Also called ALT – alanine aminotransferase. Standard liver function test
GOT	M78228 (GOT1 glutamic-oxaloacetic transaminase 1, soluble (aspartate aminotransferase 1)) M86145 (GOT2 glutamic-oxaloacetic transaminase 2, mitochondrial (aspartate aminotransferase 2)	Also called AST – aspartate aminotransferase. Standard liver function test
GGT	HUMGGTX (GGT1: gamma- glutamyltransferase 1)	Liver disease
CPK	T05088 (CKB creatine kinase, brain) HUMCKMA (CKM creatine kinase, muscle) H20196 (CKMT1 creatine kinase, mitochondrial 1 (ubiquitous)) HUMSMCK (CKMT2 creatine kinase, mitochondrial 2 (sarcomeric))	Also called CK. Mostly used for muscle pathologies. The MB variant is heart specific and used in the diagnosis of myocardial infarction
CPK-MB	T05088 (CKB creatine kinase, brain) HUMCKMA (CKM creatine kinase, muscle)	Cardiac problems – hetro-dimer of CKB and CKM
Alkaline Phosphatase	HSAPHOL- ALPL: alkaline phosphatase, liver/bone/kidney HUMALPHB - ALPI: alkaline phosphatase, intestinal HUMALPP- ALPP: alkaline phosphatase, placental (Regan isozyme)	Bone related syndromes and liver diseases, mostly with biliary involvement
Amylase	AA367524- (AMY1A: amylase, alpha 1A; salivary) T10898- (AMY2B: amylase, alpha 2B; pancreatic and 2A)	Blood/Urine. Pancreas related diseases
LDH	HSLDHAR (LDHA lactate dehydrogenase A) M77886 (LDHB lactate dehydrogenase B) HSU13680 (LDHC lactate dehydrogenase C) AA398148 (LDHL lactate dehydrogenase A –like)	Lactate Dehydrogenase. Used for myocardial infarction diagnosis and neoplastic syndromes assessment.

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	R09053 (LDHD lactate dehydrogenase D)	
G6PD	S58359 (G6PD glucose-6-phosphate dehydrogenase)	Glucose 6-phosphate dehydrogenase. Levels measured when deficiency is suspected (leading to susceptibility to hemolysis)
Alpha1 antiTrypsin	HUMA1ACM (SERPINA3 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 3) T10891 (AGT angiotensinogen (serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), memb er 8)) R83168 (SERPINA6 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 6) HUMCINHP (SERPINA5 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 5) HSA1ATCA (SERPINA1 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 1) HUMKALLS (SERPINA4 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 4) HUMTBG (SERPINA7 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 7) T60354 (SERPINA10 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 7) T60354 (SERPINA10 serine (or cysteine) proteinase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 10)	Chronic lung diseases
Renin	HSRENK (REN renin)	Some hypertension syndromes
Acid Phosphatase	HUMAAPA (ACP1: acid phosphatase 1, soluble) T48863 (ACP2: acid phosphatase 2, lysosomal) HSMRACP5 (ACP5: acid phosphatase 5, tartrate resistant) T85211 (ACP6: lysophosphatidic acid phosphatase) HSPROSAP (ACPP: acid phosphatase, prostate) AA005037 (ACPT: acid phosphatase, testicular)	Used to differentiate multiple myeloma with other monoclonal gammopathies of uncertain significance
Beta glucoronidase	T11069 (GUSB glucuronidase, beta)	Used to differentiate multiple myeloma with other monoclonal gammopathies of uncertain significance
Aldolase	HSALDAR (ALDOA aldolase A, fructose-bisphosphate)	Glycogen storage diseases

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	HSALDOBR (ALDOB aldolase B,	
	fructose-bisphosphate)	İ
	M62176 (ALDOC aldolase C, fructose-	
	bisphosphate)	
Choline esterase	HUMCHEF (BCHE	Probably used for
	butyrylcholinesterase)	organophosphates/'nerve gases"
	F00931 (ACHE acetylcholinesterase (YT	intoxications
	blood group))	
Pepsinogen	HUMPGCA PGC: progastricsin	(in the stomach), high in gastritis, low
	(pepsinogen C)	in pernicious anemia
ACE	HSACE (ACE: angiotensin I converting	Angiotensin-converting enzyme.
	enzyme (peptidyl-dipeptidase A) 1)	Sarcoidosis
	AA397955 (ACE2: angiotensin I	
	converting enzyme (peptidyl-dipeptidase	
	A) 2)	
Miscelleneous		
Test	Gencarta Contig	Comments
	<u> </u>	
Prion Protein	HUMPRP0A (PRNP prion protein (p27-	BSE diagnosis
	30) (Creutzfeld-Jakob disease,	
	Gerstmann-Straus	
	ler-Scheinker syndrome, fatal familial	
	insomnia))	
	XVIII OF I (DDD ID main markets of	
	W73057 (PRND prion protein 2	
	(dublet))	
Myelin basic	M79010 (MDD mustin basis supersity)	To OSE To Makinka alamaia
protein	M78010 (MBP myelin basic protein) R13982 (MOBP myelin-associated	In CSF. In Multiple sclerosis
protem	oligodendrocyte basic protein)	
	ongodendrocyte basic protein)	
Albumin	HSALB1 (ALB albumin)	Mostly liver function and failure of
	·	intestine absorption
Prealbumin	HSALB1 (ALB albumin)	early diagnosis of malabsorption
Ferritin	<u> </u>	
remun	HUMFERLS (FTL ferritin, light	Iron deficiency anemia
	polypeptide)	
	HUMFERHA (FTH1 ferritin, heavy polypeptide 1)	
Transferrin	S95936 (TF transferrin)	Iron deficiency anemia
11austC11II	393930 (11 transferrin)	i non denciency anemia
Haptoglobin	HUMHPA1B (HP haptoglobin)	Used in anemia states and neoplastic
Trabrogroum	TIOMERALD (III naprogroum)	syndromes
CRP	HSCREACT (CRP C-reactive protein,	C reactive protein. Associated with
	pentraxin-related)	active inflammation
	bouravin-rotaton)	
AFP	D11581 (AFP alpha-fetoprotein)	Alpha Feto Protein. Used in pregnancy
		for abnormalities screening and as a
		cancer marker.
C3	T40158 (C3 complement component 3)	Various auto-immune and allergy
	- 10-50 (O5 comprement component 5)	syndromes
C4	HSCOC4 (C4A complement component	Various auto-immune and allergy
= •	4A; C4B complement component 4B)	syndromes
Ceruloplasmin	HSCP2 (CP ceruloplasmin (ferroxidase))	Wilson's disease (liver disease)
		<u> </u>
Myoglobin	T11628 (MB myoglobin)	Rhabdomyolysis, Myocardial
FABP	CC7214 (FADD2 Face - 111 11	infarction
PADF	S67314 (FABP3: fatty acid binding	myoglobin and Fatty Acid Binding
	protein 3, muscle and heart)	

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I I I I I I I I I I I I I I I I I I I	D11754 (FABP1 liver- L-FABP- fatty acid binding protein 1) AW605378 (FABP2: fatty acid binding protein 2, intestinal) HUMALBP (FABP4: fatty acid binding protein 4, adipocyte) F06152 (FABP5: fatty acid binding protein 5 (psoriasis-associated) HSI15PGN1 (FABP6: fatty acid binding protein 6, ileal (gastrotropin) R60348 (FABP7: fatty acid binding protein 7, brain)	
S S S	HUMTROPNIN (TNNI2 troponin I, keletal, fast) Z25083 (TNNI1 troponin I, skeletal, low) HUMTROPIA (TNNI3 troponin I, cardiac)	Acute myocardial infarction
	ISB2MMU (B2M beta-2- nicroglobulin)	
Macroglobin <u>I</u>	M62177 (A2M: alpha-2-macroglobulin)	Elevated in inflammation
glycoprotein	772188 (A1BG: alpha-1-B glycoprotein)	Elevated in inflammation and tumors.
A	HUMAPOAIP (APOA1: apolipoprotein A-I)	Risk for coronary artery disease
(	ISAPOBR2 (APOB: apolipoprotein B including Ag(x) antigen))	Atherosclerotic heart disease
Apo E	<u>C61627</u> (APOE: apolipoprotein E)	diagnosis of Type III hyperlipoproteinemia, evaluate a possible genetic component to atherosclerosis, or to help confirm a diagnosis of late onset AD
to A	HUMCFTRM (CFTR: cystic fibrosis ransmembrane conductance regulator, ATP-binding cassette (sub-family C, nember 7))	Cystic fibrosis disease (a DNA test – blood sample)
PSEN1 gene I	89701 (PSEN1: presenilin 1 Alzheimer disease 3))	Early onset of familial AD (a DNA test – blood sample)
Hormones		
Test	Gencarta Contig	Comments
Erythropoietin	HSERPR (EPO erythropoietin)	Hardly used for diagnosis. Used as treatment
GH	HSGROW1 (GH1 growth hormone 1) HUMCS2 (GH2 growth hormone 2)	Growth Hormone. Endocrine syndromes
TSH	AV745295 (TSHB thyroid stimulating hormone, beta)	Part of thyroid functions tests
BetaHCG	R27266 (CGB5 chorionic gonadotropin, beta polypeptide 5)	Pregnancy, malignant syndromes in men and women
LH	HUMCGBB50 (LHB luteinizing hormone beta polypeptide)	Part of standard hormonal profile for fertility, gynecological syndromes and endocrine syndromes
FSH	AV754057 (FSHB follicle stimulating hormone, beta	Part of standard hormonal profile for fertility, gynecological syndromes and

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	polypeptide)	endocrine syndromes
TBG	S40807 (TG thyroglobulin)	Thyroxin binding globulin. Thyroid syndromes
Prolactin	HSLACT (PRL prolactin)	Various endocrine syndromes
Thyroglobulin	S40807 (TG thyroglobulin)	Follow up of thyroid cancer patients
PTH	HSTHYR (PTH parathyroid hormone)	Parathyroid Hormone. Syndromes of calcium management
Insulin/Pre Insuli	n HSPPI (INS insulin)	Diabetes
Gastrin	HSGAST (GAS gastrin)	Peptic ulcers
Oxytocin	HUMOTCB (OXT oxytocin, prepro- (neurophysin I))	Endocrine syndromes related to lactation
AVP	HUMVPC (AVP arginine vasopressin (neurophysin II, antidiuretic hormone, diabetes insipidus, neurohypophyseal))	Arginine Vasopressin. Endocrine syndromes related to the osmotic pressure of body fluids
ACTH	HUMPOMCMTC (POMC: proopiomelanocortin (adrenocorticotropin/ beta-lipotropin/ alpha-melanocyte stimulating hormone/ beta-melanocyte stimulating hormone/ beta-endorphin))	Secreted from the anterior pituitary gland. Regulation of cortisol. Abnormalities are indicative of Cushing's disease, addison's disease and adrenal tumors
BNP	HUMNATPEP (NPPB: natriuretic peptide precursor B)	Heart failure
Blood Clotting		
Test	Gencarta Contig	Comments
Protein C	S50739 (PROC protein C (inactivator of coagulation factors Va and VIIIa))	Inherited Clotting disorders
Protein S	HSSPROTR (PROS1 protein S (alpha))	Inherited Clotting disorders
Fibrinogen	D11940 (FGA: fibrinogen, A alpha polypeptide) HUMFBRB (FGB: fibrinogen, B beta polypeptide) T24021 (FGG: fibrinogen, gamma polypeptide)	Clotting disorders
Factors 2, 5, 7, 9, 10, 11, 12, 13	HUMPTHROM (F2 coagulation factor II (thrombin)) HUMTFPC (F3 coagulation factor III (thromboplastin, tissue factor)) HUMF5A (F5 coagulation factor V (proaccelerin, labile factor)) M78203 (F7 coagulation factor VII (serum prothrombin conversion accelerator)) HUMF8C (F8 coagulation factor VIII, procoagulant component (hemophilia A)) HUMCFIX (F9 coagulation factor IX (plat thromboplastic component, Christmas disease, hemophilia B)) HUMCFX (F10: coagulation factor X) HUMFXI (F11 coagulation factor XI (plat thromboplastin antecedent)) HUMCFXIIA (F12 coagulation factor XII (Hageman factor)) HUMFXIIIA (F13A1 coagulation factor X	sma

	A1 polypeptide) R28976 (F13B coagulation factor XIII, B polypeptide)	
vWF	HUMVWF (VWF von Willebrand factor)	Von Willebrand factor. Inherited Clotting disorders
Antithrombin III	T62060 (SERPINC1 serine (or cysteine) proteinase inhibitor, clade C (antithrombin ), member 1)	Inherited Clotting disorders
Cancer Marker	s	
Test	Gencarta Contig	Comments
AFP	D11581 (AFP alpha-fetoprotein)	Pregnancy, testicular cancer and hepatocellular cancer
CA125	HSIAI3B (M17S2 membrane component, chromosome 17, surface marker 2 (ovarian carcinoma antigen CA125))	Ovarian cancer
CA-15-3	HSMUC1A (MUC1 mucin 1, transmembrane)	Breast cancer
CA-19-9	HSAFUTF (FUT3: fucosyltransferase 3 (galactoside 3(4)-L-fucosyltransferase, Lewis blood group included))	Gastrointestinal cancer, pancreatic cancer
CEA	T10888 HUMCEA (CEACAM3 carcinoembryonic antigen-related cell adhesion molecule 3)	Carcinoembryonic Antigen. Colorectal cancer
PSA	HSCDN9 (KLK3: kallikrein 3, (prostate specific antigen))	
PSMA	HUMPSM (FOLH1: folate hydrolase (prostate-specific membrane antigen) 1)	
TPA, TATI, OVX1, LASA, CA54/81	HSPSTI (SPINK1: serine protease inhibitor, Kazal type 1)	Ovarian cancer
BRCA 1	H90415 (BRCA1: breast cancer 1, early onset)	
BRCA 2	H47777 (BRCA2: breast cancer 2, early onset)	Breast cancer (ovarian cancer?)
HER2/Neu	S57296 (ERBB2: v-erb-b2 erythroblastic leukemia viral oncogene homolog 2, neuro/glioblastoma derived oncogene homolog (avian))	Breast cancer
Estrogen receptor	HSERG5UTA (ESR1: estrogen receptor 1) HSRNAERB (ESR2: estrogen receptor 2 (ER beta))	Breast cancer
Progesterone receptor	T09102 (PGRMC1: progesterone receptor membrane component 1) Z32891 (PGRMC2: progesterone receptor membrane component 2)	Breast cancer

### Note:

- (i) Small portion of these "markers" are also drug targets, whether already for approved drugs (such as alpha1 antiTrypsin) or under development (e.g., GOT).

  (ii) Some of these "markers" are also used as therapeutic proteins (e.g., Erythropoietin).

  (iii) All markers are found in the blood/serum unless otherwise specified.

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#DRUG\_DRUG INTERACTION: refers to proteins involved in a biological process which mediates the interaction between at least two consumed drugs. Novel splice variants of known proteins involved in interaction between drugs may be used, for example, to modulate such drug-drug interactions. Examples of proteins involved in drugdrug interactions are presented in Table 9 together with the corresponding internal gene contig name, enabling to allocate the new splice variants within the data files in the attached CD-ROMs 1 and 3-PLEASE COMPLETE.

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Table 9			
Contig	Gene Symbol	Description	
HUMANTLA	SLC3A2	4f2 cell-surface antigen heavy chain	
Z43093	HTR6	5-hydroxytryptamine 6 receptor	
HSXLALDA	ABCD1	Adrenoleukodystrophy protein	
R35137	GPT	Alanine aminotransferase	
D11683	ALDH1	Aldehyde dehydrogenase, cytosolic	
T53833	AOX1	Aldehyde oxidase	
HUMD4G08M3	ORM1	Alpha-1-acid glycoprotein 1	
HUMD4G08M3	ORM2	Alpha-1-acid glycoprotein 2	
HUMABPA	ABP1	Amiloride-sensitive amine oxidase [copper-containing]	
S62734	MAOB	Amine oxidase [flavin-containing] b	
AA526963	SLC6A14	Amino acid transporter b0+	
HSAE2	SLC4A2	Anion exchange protein 2	
M78110	SLC4A3	Anion exchange protein 3	
M78052	ABCB2	Antigen peptide transporter 1	
HUMMHCIIAB	ABCB3	Antigen peptide transporter 2	
F02693	APOD	Apolipoprotein d	
M62234	ASNA1	Arsenical pump-driving ATPase	
HUMNORTR	NAT1	Arylamine n-acetyltransferase 1	
T67129	NAT1	Arylamine n-acetyltransferase 1	
AI262683	NAT2	Arylamine n-acetyltransferase 2	
Z39550	ABCB9	ATP-binding cassette protein abcb9	
Z44377	ABCA1	ATP-binding cassette, sub-family a, member 1	
M78056	ABCA2	ATP-binding cassette, sub-family a, member 2	
T05334	ABCA3	ATP-binding cassette, sub-family a, member 3	
T79973	ABCB6	ATP-binding cassette, sub-family b, member 6, mitochondrial	
T78010	ABCB7	ATP-binding cassette, sub-family b, member 7, mitochondrial	
R89046	ABCB8	ATP-binding cassette, sub-family b, member 8, mitochondrial	
H64439	ABCD2	ATP-binding cassette, sub-family d, member 2	
M85760	ABCD3	ATP-binding cassette, sub-family d, member 3	
Z21904	ABCD4	ATP-binding cassette, sub-family d, member 4	
Z39977	ABCG1	ATP-binding cassette, sub-family g, member 1	
Z45628	ABCG2	ATP-binding cassette, sub-family g, member 2	
T80665	SLC7A9	B(0,+)-type amino acid transporter 1	
AF091582	ABCB11	Bile salt export pump	
Z38696	BLMH	Bleomycin hydrolase	
T08127	BNPI	Brain-specific na-dependent inorganic phosphate cotransporter	
F00545	SLC12A2	Bumetanide-sensitive sodium-(potassium)-chloride cotransporter 2	
HSU07969	CDH17	Cadherin-17	
T10238	SLC25A12	Calcium-binding mitochondrial carrier protein aralar1	
Z40674	SLC25A13	Calcium-binding mitochondrial carrier protein aralar2	
T61818	ABCC2	Canalicular multispecific organic anion transporter 1	

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T39953	ABCC3	Canalicular multispecific organic anion transporter 2
HUMCRE	CBR1	Carbonyl reductase [nadph] 1
AA320697	CBR3	Carbonyl reductase [nadph] 3
F03362	COMT	Catechol o-methyltransferase, membrane-bound form
T11004	COMT	Catechol o-methyltransferase, membrane-bound form
T39368	SLC7A4	Cationic amino acid transporter-4
S74445	RBP5	Cellular retinol-binding protein iii
T55952	RBP5	Cellular retinol-binding protein iii
HSU39905	SLC18A1	Chromaffin granule amine transporter
R52371	SLC35A1	Cmp-sialic acid transporter
D20754	CNT3	Concentrative nucleoside transporter 3
HSMNKMBP	ATP7A	Copper-transporting ATPase 1
HUMWND	ATP7B	Copper-transporting ATPase 2
HUMCFTRM	ABCC7	Cystic fibrosis transmembrane conductance regulator
F10774	SLC7A11	Cystine/glutamate transporter
HUMCYPADA	CYP11B1	Cytochrome P450 11B1, mitochondrial
HUMARM	CYP19	Cytochrome P450 19
HUMCYP145	CYP1A1	Cytochrome P450 1A1
R21282	CYP26	Cytochrome P450 26
AF209774	CYP2A13	Cytochrome P450 2A13
HSC45B2C	CYP2A6	Cytochrome P450 2A6
HSC45B2C	CYP2A7	Cytochrome P450 2A7
HSP452B6	CYP2B6	Cytochrome P450 2B6
HUM2C18	CYP2C18	Cytochrome P450 2C18
HSCP450	CYP2C19	Cytochrome P450 2C19
HUM2C18	CYP2C19	Cytochrome P450 2C19
HUMCYPAX	CYP2C8	Cytochrome P450 2C8
HSCP450	CYP2C9	Cytochrome P450 2C9
HSP450	CYP2D6	Cytochrome P450 2D6
M77918	CYP2E1	Cytochrome P450 2E1
HUMCYPIIF	CYP2F1	Cytochrome P450 2F1
H09076	CYP2J2	Cytochrome P450 2J2
R07010	CYP39A1	Cytochrome P450 39A1
HUMCYPHLP	CYP3A3	Cytochrome P450 3A3
HUMCYPHLP	CYP3A4	Cytochrome P450 3A4
AA416822	CYP3A43	Cytochrome P450 3A43
HUMCYP3A	CYP3A5	Cytochrome P450 3A5
T82801	CYP3A7	Cytochrome P450 3A7
HSCYP4AA	CYP4A11	Cytochrome P450 4A11
S67580	CYP4A11	Cytochrome P450 4A11
HUMCP45IV	CYP4B1	Cytochrome P450 4B1
T98002	CYP4F12	Cytochrome P450 4F12
AA377259	CYP4F2	Cytochrome P450 4F2
AI400898	CYP4F8	Cytochrome P450 4F8
HSU09178	DPYD	Dihydropyrimidine dehydrogenase [nadp+]
W03174	DPYD	Dihydropyrimidine dehydrogenase [nadp+]
HUMFMO1	FMO1	Dimethylaniline monooxygenase [n-oxide forming] 1
HSFLMON2R	FMO2	Dimethylaniline monooxygenase [n-oxide forming] 2
T64494	FMO2	Dimethylaniline monooxygenase [n-oxide forming] 2
T40157	FMO3	Dimethylaniline monooxygenase [n-oxide forming] 3
HSFLMON2R	FMO4	Dimethylaniline monooxygenase [n-oxide forming] 4
D12220	FMO5	Dimethylaniline monooxygenase [n-oxide forming] 5
H25503	HET	Efflux transporter like protein
T12485	HET	Efflux transporter like protein
M78151	EPHX1	Epoxide hydrolase 1
T66884	SLC29A1	Equilibrative nucleoside transporter 1
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HSHNP36	SLC29A2	Equilibrative nucleoside transporter 2
T08444	SLC1A3	Excitatory amino acid transporter 1
HSU01824	SLC1A2	Excitatory amino acid transporter 2
HSU03506	SLC1A1	Excitatory amino acid transporter 3
F07883	SLC1A6	Excitatory amino acid transporter 4
N39099	SLC1A7	Excitatory amino acid transporter 5
F00548	SLC2A9	Facilitative glucose transporter family member glut9
T95337	SLC27A1	Fatty acid transport protein
Z44099	SLC27A1	Fatty acid transport protein
HUMALBP	FABP4	Fatty acid-binding protein, adipocyte
S67314	FABP3	Fatty acid-binding protein, heart
AW605378	FABP2	Fatty acid-binding protein, intestinal
L25227	SLC19A1	Folate transporter 1
HSI15PGN1	FABP6	Gastrotropin
Z40427	G6PT1	Glucose 5-phosphate transporter
D11793	SLC2A1	Glucose transporter type 1,erythrocyte/brain
N27535	SLC2A10	Glucose transporter type 10
T52633	SLC2A11	Glucose transporter type 11
HUMLGTPA	SLC2A2	Glucose transporter type 2, liver
HUMLGTPA	SLC2A2	Glucose transporter type 2,liver
T07239	SLC2A3	Glucose transporter type 3, brain
HUMIRGT	SLC2A4	Glucose transporter type 4,insulin-responsive.
M62105	SLC2A5	Glucose transporter type 5,small intestine
T59518	SLC2A8	Glucose transporter type 8
HUMLGTH1	GSTA1	Glutathione s-transferase a1
HUMLGTH1	GSTA2	Glutathione s-transferase a2
T98291	GSTA3	Glutathione s-transferase a2 Glutathione s-transferase a3-3
Z21581	GSTA4	
		Glutathione s-transferase a4-4
HSGST4	GSTM1	Glutathione s-transferase mu 1
D31291	GSTM2	Glutathione s-transferase mu 2
HSGST4	GSTM2	Glutathione s-transferase mu 2
T08311	GSTM3	Glutathione s-transferase mu 3
HUMGSTM4B	GSTM4	Glutathione s-transferase mu 4
HUMGSTM5	GSTM5	Glutathione s-transferase mu 5
T05391	GSTP1	Glutathione s-transferase p
AA346312	GSTT1	Glutathione s-transferase theta 1
R08187	GSTT2	Glutathione s-transferase theta 2
Z25318	GSTK1	Glutathione s-transferase, mitochondrial
H03163	SLC37A1	Glycerol-3-phosphate transporter
AA363955	SLC5A7	High affinity choline transporter
HSRRMRNA	SLC7A1	High-affinity cationic amino acid transporter-1
R22196	SLC31A1	High-affinity copper uptake protein 1
AA918012	SLC10A2	Ileal sodium/bile acid transporter
F00840	SLC7A5	Large neutral amino acid transporter small subunit 1
M79133	SLC7A5	Large neutral amino acid transporter small subunit 1
Z38621	SLC7A8	Large neutral amino acids transporter small subunit 2
HUMCARAA	CES1	Liver carboxylesterase
S52379	CES1	Liver carboxylesterase
T55488	SLC21A6	Liver-specific organic anion transporter
W78748	SLC5A4	Low affinity sodium-glucose cotransporter
T54842	SLC7A2	Low-affinity cationic amino acid transporter-2
T87799	ABCA7	Macrophage abc transporter
Z17844	LRP	Major vault protein
Z24885	GSTZ1	Maleylacetoacetate isomerase
T39939	MT1A	Metallothionein-IA
R99207	MT1B	Metallothionein-IB

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T39939	MTIE	Metallothionein-IE	
D11725	MT1F	Metallothionein-IF	
S68949	MT1G	Metallothionein-IG	
S68954	MT1G	Metallothionein-IG	
HSFMET	MT1H	Metallothionein-IH	
S52379	MT2A	Metallothionein-II	
M78846	MT3	Metallothionein-III	
AA570216	MTIK	Metallothionein-IK	
S68954	MTIK	Metallothionein-IK	
D11725	MTIL	Metallothionein-IL	
HSPP15	MTIL	Metallothionein-IL	
HSPP15	MTIR	Metallothionein-IR	
NM032935	MT4	Metallothionein-IV	
HUMGST	MGST1	Microsomal glutathione s-transferase 1	
H59104	MGST2	Microsomal glutathione s-transferase 2	
T47062	MGST3	Microsomal glutathione s-transferase 3	
SSMPCP	SLC25A3	Mitochondrial phosphate carrier protein	
R14814	SULT1A3	Monoamine-sulfating phenol sulfotransferase	
HUMARYTRAB	SULT1A3	Monoamine-sulfating phenol sulfotransferase	
M62141	SLC16A1	Monocarboxylate transporter 1	
H90048	SLC16A6	Monocarboxylate transporter 2	
F02520	SLC16A2	Monocarboxylate transporter 3	
AI005004	SLC16A8	Monocarboxylate transporter 4	
T59354	SLC16A3	Monocarboxylate transporter 5	
R22416	SLC16A4	Monocarboxylate transporter 6	
T78890	SLC16A5	Monocarboxylate transporter 7	
F01173	SLC16A7	Monocarboxylate transporter 8	
Z41819	ABCB1	Multidrug resistance protein 1	
AL041030	ABCB4	Multidrug resistance protein 3	
SATHRMRP	ABCC1	Multidrug resistance-associated protein 1	
R00050	ABCC4	Multidrug resistance-associated protein 4	
M78673	ABCC5	Multidrug resistance-associated protein 5	
R99091	ABCC6	Multidrug resistance-associated protein 6	
T69749	ABCC6	Multidrug resistance-associated protein 6	
D11495	DIA4	Nad(p)h dehydrogenase [quinone] 1	
HUMNRAMP	SLC11A1	Natural resistance-associated macrophage protein 1	
Z38360	SLC11A2	Natural resistance-associated macrophage protein 2	
HUMASCT1A	SLC1A4	Neutral amino acid transporter a	
AW237674	SLC1A5	Neutral amino acid transporter b(0)	
M78631	SLC3A1	Neutral and basic amino acid transport protein rbat	
HSU08021	NNMT	Nicotinamide n-methyltransferase	
T87759	SLC22A4	Novel organic cation transporter 1	
Z41935	SLC15A2	Oligopeptide transporter, kidney isoform	
HSU21936	SLC15A1	Oligopeptide transporter, small intestine isoform	
M62053	OAT1	Organic anion transporter 1	
H18607	OAT3	Organic anion transporter 3	
R16970	OAT4	Organic anion transporter 4	
T39111	SLC21A9	Organic anion transporter b	
Z41576	SLC21A11	Organic anion transporter oATP-d	
T23657	SLC21A12	Organic anion transporter oATP-e	
Z21041	SLC21A14	Organic anion transporting polypeptide 14	
H75435	SLC21A8	Organic anion transporting polypeptide 8	
HSU77086	SLC22A1	Organic cation transporting polypeptide 8  Organic cation transporter 1	
HSOCTK.	SLC22A2	Organic cation transporter 1 Organic cation transporter 2	
R00207	SLC22A3	Organic cation transporter 3	
H30224	ORCTL4	Organic cation transporter 3 Organic cation transporter like 4	
1100227	OROLLA	Lorgano canon nanghories nye 4	

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H25503	ORCTL2	Organic cation transporter-like 2
Z38659	SLC22A5	Organic cation/carnitine transporter 2
AB010438	ORCTL3	Organic-cation transporter like 3
T95621	ORNT1	Ornithine transporter
AA398593	ORNT2	Ornithine transporter 2
R79412	NTT5	Orphan sodium- and chloride-dependent neurotransmitter transporter ntt5
H82347	NTT73	Orphan sodium and chloride-dependent neurotransmitter transporter ntt73
Z43484	NTT73	Orphan sodium- and chloride-dependent neurotransmitter transporter ntt73
Z44749	SLC25A17	Peroxisomal membrane protein pmp34
HUMARYLSUL	SULT1A1	Phenol-sulfating phenol sulfotransferase 1
HUMARYLSUL	SULT1A2	Phenol-sulfating phenol sulfotransferase 2
D12243	RBP4	Plasma retinol-binding protein
HUMATPAD	ATP12A	Potassium-transporting ATPase alpha chain 2
Z40030	ATP8A1	Potential phospholipid-transporting ATPase ia
Z40188	FIC1	Potential phospholipid-transporting ATPase ic
T86800	SLC31A2	Probable low-affinity copper uptake protein 2
Z41717	PTGIS	Prostacyclin synthase
S78220	PTGS1	Prostaglandin g/h synthase 1
HUMENDOSYN	PTGS2	Prostaglandin g/h synthase 2
T85296	SLC21A2	Prostaglandin transporter
M62053	SLC22A6	Renal organic anion transport protein 1
HSU26209	SLC13A2	Renal sodium/dicarboxylate cotransporter
Z40774	SLC13A2	Renal sodium/dicarboxylate cotransporter
HSNAPI1	SLC17A1	Renal sodium-dependent phosphate transport protein 1
HUMNAPI3X	SLC34A1	Renal sodium-dependent phosphate transport protein 2
H85361	ABCA4	Retinal-specific ATP-binding cassette transporter
S74445	CRABP1	Retinoic acid-binding protein i, cellular
HUMCRABP	CRABP2	Retinoic acid-binding protein ii, cellular
HUMCRBP	RBP1	Retinol-binding protein i, cellular
S57153	RBP1	Retinol-binding protein i, cellular
T07054	RBP2	Retinol-binding protein ii, cellular
T63266	RBP2	Retinol-binding protein ii, cellular
HUMBGTIR	SLC6A12	Sodium- and chloride-dependent betaine transporter
HUMCRTR	SLC6A8	Sodium- and chloride-dependent creatine transporter 1
R20043	SLC6A13	Sodium- and chloride-dependent gaba transporter 2
S70609	SLC6A9	Sodium- and chloride-dependent glycine transporter 1
AA625644	SLC6A5	Sodium- and chloride-dependent glycine transporter 2
M78677	SLC6A6	Sodium- and chloride-dependent taurine transporter
T10761	SLC4A4	Sodium bicarbonate cotransporter nbc1
AA452802	NBC4	Sodium bicarbonate cotransporter nbc4a
HUMCNC	SLC8A1	Sodium/calcium exchanger 1
R20720	SLC8A2	Sodium/calcium exchanger 2
T07666	SLC8A3	Sodium/calcium exchanger 3
T07666	SLC8A3	Sodium/glucose cotransporter 1
HUMSGLCT	SLC5A2	Sodium/glucose cotransporter 2
S83549	SLC9A2	Sodium/hydrogen exchanger 2
HSU66088	SLC5A5	Sodium/iodide cotransporter
HSU62966	SLC28A1	Sodium/nucleoside cotransporter 1
AA358822	SLC28A2	Sodium/nucleoside cotransporter 2
HUMNTCP	SLC10A1	Sodium/taurocholate cotransporting polypeptide
HSGATIMR	SLC6A1	Sodium-and chloride-dependent gaba transporter 1
F05686	SLC6A11	Sodium-and chloride-dependent gaba transporter 3
AA604857	SVCT1	Sodium-denpendent vitamin c transporter 1
AAUUTOJ/	PACII	Sodium-denpendent vitamin c transporter i

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T27309	SVCT2	Sodium-denpendent vitamin c transporter 2
S44626	SLC6A3	Sodium-dependent dopamine transporter
Z39412	NADC3	Sodium-dependent high-affinity dicarboxylate transporter
T77525	SLC5A6	Sodium-dependent multivitamin transporter
HUMNORTR	SLC6A2	Sodium-dependent noradrenaline transporter
HSZ83953	SLC17A3	Sodium-dependent phosphate transport protein 3
R06460	SLC17A3	Sodium-dependent phosphate transport protein 3
HSZ83953	SLC17A4	Sodium-dependent phosphate transport protein 4
HSY10506	SLC17A4	Sodium-dependent phosphate transport protein 4
H40741	SLC6A7	Sodium-dependent proline transporter
HSSERT	SLC6A4	Sodium-dependent serotonin transporter
T64950	SLC21A3	Sodium-independent organic anion transporter
M79233	EPHX2	Soluble epoxide hydrolase
Z39813	SLC25A18	Solute carrier
HUMSTAR	STAR	Steroidogenic acute regulatory protein
Z20453	STAR	Steroidogenic acute regulatory protein
R69741	SLC26A2	Sulfate transporter
T08860	ABCC8	Sulfonylurea receptor 1
R73927	ABCC9	Sulfonylurea receptor 2
T84623	SULT1C1	Sulfotransferase 1C1
R58632	SULT1C2	Sulfotransferase 1C2
T95810	SLC18A2	Synaptic vesicle amine transporter
AF080246	TRAG3	Taxol resistant associated protein 3
R20880	SLC19A2	Thiamine transporter 1
HSU44128	SLC12A3	Thiazide-sensitive sodium-chloride cotransporter
S62904	TPMT	Thiopurine s-methyltransferase
HSPBX2	G17	Transporter protein
T62038	G17	Transporter protein
R53836	SLC35A3	UDP n-acetylglucosamine transporter
T60594	SLC35A2	UDP-galactose translocator
HUMUGT1FA	UGT1	UDP-glucuronosyltransferase 1-1, microsomal
HUMUGT1FA	UGT1A10	UDP-glucuronosyltransferase 1A10
HUMUGT1FA	UGT1A7	UDP-glucuronosyltransferase 1A7
HUMUGT1FA	UGT1A8	UDP-glucuronosyltransferase 1A8
HUMUGT1FA	UGT1A9	UDP-glucuronosyltransferase 1A9
HSUGT2BIO	UGT2B10	UDP-glucuronosyltransferase 2B10, microsomal
HSUDPGT	UGT2B11	UDP-glucuronosyltransferase 2B11, microsomal
N70316	UGT2B11	UDP-glucuronosyltransferase 2B11, microsomal
HSU08854	UGT2B15	UDP-glucuronosyltransferase 2B15, microsomal
T24450	UGT2B17	UDP-glucuronosyltransferase 2B17, microsomal
HSUDPGT	UGT2B4	UDP-glucuronosyltransferase 2B4, microsomal
HUMUDPGTA	UGT2B7	UDP-glucuronosyltransferase 2B7, microsomal
AI002801	SLC14A1	Urea transporter, erythrocyte
Z19313	SLC14A1	Urea transporter, erythrocyte
AI002801	SLC14A2	Urea transporter, kidney
HSU09210	SLC18A3	Vesicular acetylcholine transporter
HUMKCHB	KCNA4	Voltage-gated potassium channel protein kv1.4
R09608	XDH	Xanthine dehydrogenase/oxidase
T64266	SLC7A7	Y+l amino acid transporter 1
T10628	SLC30A1	Zinc transporter 1 Zinc transporter 1
AA322641	SLC30A4	Zinc transporter 4
AA322041	DLC3UM4	2 me transporter 4

#DISEASE\_RELATED\_CLINICAL\_PHENOTYPE - This field denotes the possibility of using biomolecular sequences of the present invention for the diagnosis

and/or treatment of genetic diseases such as listed in the following URL: <a href="https://www.geneclinics.org/servlet/access?id=8888891&key=X9D790O5re1Az&db=genete-sts&res=&fcn=b&grp=g&genesearch=true&testtype=both&ls=l&type=e&qry=&sub-mit=Search and in Table 10, below. This list includes genetic diseases and genes which may be used for the detection and/or treatment thereof. As such, newly uncovered variants of these genes may be used for improved diagnosis and/or treatment when used singly or in combination with the previously described genes.

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Table 10

		Tuote 10
Gencarta Contig	Gene Symbol	Disease
HSCFTRMA	CFTR	Congenital Bilateral Absence of the Vas Deferens; Cystic Fibrosis
HUMCFTR M	CFTR	Congenital Bilateral Absence of the Vas Deferens ;Cystic Fibrosis
HUMFGFR3	FGFR3	Achondroplasia; Crouzon Syndrome with Acanthosis Nigricans; FGFR-Related Craniosynostosis Syndromes; Hypochondroplasia; Muenke Syndrome; Severe Achondroplasia with Developmental Delay and Acanthosis Nigricans (SADDAN); Thanatophoric Dysplasia
T07012	FGD1	Aarskog Syndrome
HSCA1III	COL3A1	Ehlers-Danlos Syndrome, Vascular Type
HUMCOL2 A1B	COL2A1	Achondrogenesis Type 2 ;Kniest Dysplasia ;Spondyloepimetaphyseal Dysplasia, Strudwick Type ;Spondyloepiphyseal Dysplasia, Congenita ;Stickler Syndrome ;Stickler Syndrome Type I
R68817	APRT	Adenine Phosphoribosyltransferase Deficiency
HUMAMPD 1	AMPD1	Adenosine Monophosphate Deaminase 1
M62124	PXR1	Zellweger Syndrome Spectrum
HSXLALDA	ABCD1	Adrenoleukodystrophy, X-Linked
T28718	BTK	X-Linked Agammaglobulinemia
R91110	IL2RG	X-Linked Severe Combined Immunodeficiency
HUMPEDG	OCA2	Oculocutaneous Albinism Type 2
HSU01873	TYR	Oculocutaneous Albinism Type 1
HSOA1MRN A	OA1	Ocular Albinism, X-Linked
R14843	TYRP1	Oculocutaneous Albinism Type 3 (TRP1 Related)
HSALDAR	ALDOA	Aldolase A Deficiency
T40633	HBA1	Alpha-Thalassemia
T40633	HBA2	Alpha-Thalassemia ;Hemoglobin Constant Spring
HSU09820	ATRX	Alpha-Thalassemia X-Linked Mental Retardation Syndrome
HUMCOL4 A5	COL4A5	Alport Syndrome; Alport Syndrome, X-Linked
T61627	APOE	Apolipoprotein E Genotyping ;Familial Combined Hyperlipidemia ;Hyperlipoproteinemia Type III
T89701	PSEN1	Alzheimer Disease Type 3 ;Early-Onset Familial Alzheimer Disease

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R05822	PSEN2	Alzheimer Disease Type 4 ;Early-Onset Familial Alzheimer Disease
HSTTRM	TTR	Transthyretin Amyloidosis
T23978	SOD1	Amyotrophic Lateral Sclerosis
HUMANDR EC	AR	Androgen Insensitivity Syndrome ;Spinal and Bulbar Muscular Atrophy
Z19491	UBE3A	Angelman Syndrome
HUMPAX6 AN	PAX6	Aniridia ;Anophthalmia ;Isolated Aniridia ;Peters Anomaly ;Peters Anomaly with Cataract ;Wilms Tumor-Aniridia-Genital Anomalies-Retardation Syndrome
HUMKGFR A	FGFR2	Apert Syndrome ;Beare-Stevenson Syndrome ;Crouzon Syndrome ;FGFR-Related Craniosynostosis Syndromes ;Jackson-Weiss Syndrome ;Pfeiffer Syndrome Type 1, 2, and 3
HSU03272	FBN2	Congenital Contractural Arachnodactyly
Z19459	AMCD1	Arthrogryposis Multiplex Congenita, Distal, Type I
T88756	ATM	Ataxia-Telangiectasia
H30056	BBS1	Bardet-Biedl Syndrome
Z25009	BBS2	Bardet-Biedl Syndrome
T64876	BBS4	Bardet-Biedl Syndrome
N27125	PTCH	Nevoid Basal Cell Carcinoma Syndrome
N25339	VMD2	Best Vitelliform Macular Dystrophy
N71795	VMD2	Best Vitelliform Macular Dystrophy
нимнввзе	HBB	Beta-Thalassemia ;Hemoglobin E ;Hemoglobin S Beta-Thalassemia ;Hemoglobin SC ;Hemoglobin SD ;Hemoglobin SO ;Hemoglobin SS ;Sickle Cell Disease
H53763	BLM	Bloom Syndrome
N22283	EYA1	Branchiootorenal Syndrome
H90415	BRCA1	BRCA1 and BRCA2 Hereditary Breast/Ovarian Cancer; BRCA1 Hereditary Breast/Ovarian Cancer
H47777	BRCA2	BRCA1 and BRCA2 Hereditary Breast/Ovarian Cancer; BRCA2 Hereditary Breast/Ovarian Cancer
Z33575	SOX9	Campomelic Dysplasia
S67156	ASPA	Canavan Disease
T52465	CPS1	Carbamoylphosphate Synthetase I Deficiency
HSVD3HYD	CYP27A1	Cerebrotendinous Xanthomatosis
S66705	MPZ	Charcot-Marie-Tooth Neuropathy Type 1 ;Charcot-Marie-Tooth Neuropathy Type 1B ;Congenital Hypomyelination
HSGAS3MR	PMP22	Charcot-Marie-Tooth Neuropathy Type 1 ;Charcot-Marie-Tooth Neuropathy Type 1A ;Charcot-Marie-Tooth Neuropathy Type 1E ;Hereditary Neuropathy with Liability to Pressure Palsies
Т93208	PMP22	Charcot-Marie-Tooth Neuropathy Type 1 ;Charcot-Marie-Tooth Neuropathy Type 1A ;Charcot-Marie-Tooth Neuropathy Type 1E ;Hereditary Neuropathy with Liability to Pressure Palsies
HSGAPJR	GJB1	Charcot-Marie-Tooth Neuropathy Type X
HSXCGD	CYBB	Chronic Granulomatous Disease
S67289	CYBB	Chronic Granulomatous Disease
HSASD	ASS	Citrullinemia
HUMPAX2 A	PAX2	Anophthalmia ;Renal-Coloboma Syndrome
HUMP45C2 1	CYP21A2	21-Hydroxylase Deficiency

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S74720	NR0B1	Complex Glycerol Kinase Deficiency ;Dosage-Sensitive Sex Reversal
		;Isolated X-Linked Adrenal Hypoplasia Congenita;X-Linked Adrenal
		Hypoplasia Congenita
HSKERTRN	TGM1	Autosomal Recessive Congenital Ichthyosis
S	CDC	Transition Co
BF928311	CPO	Hereditary Coproporphyria
HSCPPOX	CPO	Hereditary Coproporphyria
HUMTGFBI G	TGFBI	Avellino Corneal Dystrophy ;Granular Corneal Dystrophy ;Lattice Corneal Dystrophy Type I
R08437	MSX2	Craniosynostosis Type II ;Parietal Foramina 1
HUMPRP0A	PRNP	Prion Diseases
T08652	DRPLA	DRPLA
Z46151	DRPLA	DRPLA
HSWT1	WT1	Denys-Drash Syndrome ;Wilms Tumor ;Wilms Tumor-Aniridia-Genital Anomalies-Retardation Syndrome ;WT1-Related Disorders
T52050	WT1	Denys-Drash Syndrome ;Wilms Tumor ;Wilms Tumor-Aniridia-Genital Anomalies-Retardation Syndrome ;WT1-Related Disorders
M78080	ATP2A2	Darier Disease
Z30219	DCR	Down Syndrome Critical Region
T11279	DKC1	Dyskeratosis Congenita
T08131	DYT1	Early-Onset Primary Dystonia (DYT1)
T50729	ED1	Hypohidrotic Ectodermal Dysplasia ;Hypohidrotic Ectodermal Dysplasia, X-Linked
HUMPA1V	COL5A1	Ehlers-Danlos Syndrome, Classic Type
HUMLYSY L	PLOD	Ehlers-Danlos Syndrome, Kyphoscoliotic Form
HSCOLIA	COL1A2	Ehlers-Danlos Syndrome, Arthrochalasia Type ;Osteogenesis Imperfecta
HUMCG1PA 1	COL1A1	Ehlers-Danlos Syndrome, Arthrochalasia Type ;Osteogenesis Imperfecta
Z30171	TAZ	3-Methylglutaconic Aciduria Type 2 ;Cardiomyopathy ;Dilated Cardiomyopathy ;Endocardial Fibroelastosis ;Familial Isolated Noncompaction of Left Ventrical Myocardium
Z39302	TAZ	3-Methylglutaconic Aciduria Type 2 ;Cardiomyopathy ;Dilated Cardiomyopathy ;Endocardial Fibroelastosis ;Familial Isolated Noncompaction of Left Ventrical Myocardium
HUMKERK 5A	KRT5	Epidermolysis Bullosa Simplex
R72295	KRT14	Epidermolysis Bullosa Simplex
HUMKTEP2	KRT1	Epidermolytic Hyperkeratosis ;Nonepidermolytic Palmoplantar
A		Hyperkeratosis
HUMK10A	KRT10	Epidermolytic Hyperkeratosis
M78482	CHS1	Chediak-Higashi Syndrome
HSTCD1	CHM	Choroideremia
HSAGALAR		Fabry Disease
T79651	GLA	Fabry Disease
HUMF5A	F5	Factor V Leiden Thrombophilia ;Factor V R2 Mutation Thrombophilia
HUMFXI	F11	Factor XI Deficiency
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HUMFWR1	M79108	APC	Colon Cancer (APC I1307K related) ;Familial Adenomatous Polyposis
HUMFWR1	710610	TENTE A D	T 71.17
M78417   FMR2   FRAXE Syndrome		<del>,</del>	
R06415			
HSALDOBR   ALDOB   Hereditary Fructose Intolerance		<del>•</del>	······································
HUMALFU FUCA1 C C M85904 FH Fumarate Hydratase Deficiency H85361 ABCA4 Age-Related Macular Degeneration ; Retinitis Pigmentosa, Autosomal Recessive ; Stargardt Disease 1 R21596 GALKI Galactokinase Deficiency T33762 GALT Galactosemia HUMGCB GBA Gaucher Disease T48672 GBA Gaucher Disease HUMGCB GBA Gaucher Disease T48672 GGBA Gaucher Disease T48672 GGBA Gaucher Disease HUMGCB GBA Gaucher Disease HSGCRAR NR3CI Glucocorticoid Resistance S58359 G6FD Glucose-6-Phosphate Dehydrogenase Deficiency HSGKTS1 GK Glycerol Kinase Deficiency HSGKTS1 GK Glycerol Kinase Deficiency GGPC Glycogen Storage Disease Type II HUMGAA GAA Glycogen Storage Disease Type II HUMGBE GBEI Glycogen Storage Disease Type III HUMHGBE GBEI Glycogen Storage Disease Type IV HSPHOSRI PYGM Glycogen Storage Disease Type V D12179 PYGL Glycogen Storage Disease Type VI HUMGLI3A GLI3 GLI3 -Related Disorders ;Greig Cephalopolysyndactyly Syndrome ;Pallister-Hall Syndrome F09335 ATP2CI Halley-Bialey Disease M62210 CCM1 Angiokeratoma Corporis Diffusum with Arteriovenous Fistulas ;Familial Carebral Cavernous Malformation T59431 HFE HSFL-ASSociated Hereditary Hemorhomatosis HSALKIA ACVRL1 Hereditary Hemorhagic Telangiectasia HUMFRO BNG Hereditary Hemorhagic Telangiectasia HUMFWIII F8 Hemophilia A HUMFWIII F8 Hemophilia B HSU03911 MSH2 Hereditary Non-Polyposis Colon Cancer HSKETTT RET Hirschsprung Disease ;Multiple Endocrine Neoplasia Type 2 HUMSHH HH Holoprosencephaly 3 N81026 TBX5 Holt-Oram Syndrome M82620 CBS Homocystinuria T093828 HD Humington Disease HUMGPHC GFA Alexander Disease			
C         M85904         FH         Fumarate Hydratase Deficiency           M85361         ABCA4         Age-Related Macular Degeneration; Retinitis Pigmentosa, Autosomal Recessive; Stargardt Disease 1           R31596         GALKI         Galactosemia           HUMGCB         GBA         Gaucher Disease           T44672         GBA         Gaucher Disease           HSGCRAR         NR3C1         Glucosorticoid Resistance           S83839         G6PD         Glucose-c-Phosphate Dehydrogenase Deficiency           HSRNAGLK         GK         Glycerol Kinase Deficiency           HSRNAGLK         GK         Glycogen Storage Disease Type II           HSRNAGLK         GK         Glycogen Storage Disease Type II           HUMGAAA         GAA         Glycogen Storage Disease Type III           HUMHGBE         GBE1         Glycogen Storage Disease Type VI           HSPHOSR1         PYGM         Glycogen Storage Disease Type VI           HSPHOSR1         PYGM         Glycogen Storage Disease Type VI           HSHMPFK         PFKM         Glycogen Storage Disease Type VII           HSHMPFK         FIK         Glycogen Storage Disease Type VII           HUMGLJA         GLI3         GLI3-Related Disorders; Greig Cephalopolysyndactyly Syndrome; Pallister-Hall Syndrome		<del></del>	
ABCA4	c	FUCA1	Fucosidosis
Recessive ;Stargardt Disease 1  R31596 GALK1 Galactokinase Deficiency T53762 GALT Galactosemia  HUMGCB GBA Gaucher Disease HSGCRAR NR3C1 Glucocorticoid Resistance S58359 G6PD Glucose-6-Phosphate Dehydrogenase Deficiency HSGKTS1 GK Glycerol Kinase Deficiency HSGRNAGLK GK Glycerol Kinase Deficiency HSRNAGLK GK Glycerol Kinase Deficiency HSRNAGLK GK Glycogen Storage Disease Type II HUMGAA GAA Glycogen Storage Disease Type II HUMGBE GBEI Glycogen Storage Disease Type II HUMHGBE GBEI Glycogen Storage Disease Type V H2FHOSR1 PYGM Glycogen Storage Disease Type V H2FHOSR1 PFKM Glycogen Storage Disease Type V H2HMGHGIA GL3 GL3 GL43-Related Disorders; Greig Cephalopolysyndactyly Syndrome ;Pallister-Hall Syndrome F09335 A7P2C1 Halley-Hailey Disease F09335 A7P2C1 Halley-Hailey Disease F08210 CCMI Angiokeratoma Corporis Diffusum with Arteriovenous Fistulas ;Familial Cerebral Cavernous Malformation T59431 HFE HFE- Associated Hereditary Hemochromatosis HSALKIA ACVRL1 Hereditary Hemorrhagic Telangicctasia HUMFNDO ENG Hereditary Hemorrhagic Telangicctasia HUMFNDI F8 Hemophilia A HUMFNII F8 Hemophilia A HUMFVIII F8 Hemophilia A HUMFVIII F8 Hemophilia A HUMFVIII F8 Hemophilia A Hereditary Non-Polyposis Colon Cancer E224775 MLH1 Hereditary Non-Polyposis Colon Cancer HSRETTT RET Hirschsprung Disease ;Multiple Endocrine Neoplasia Type 2 HUMSHH SHH Holoprosencephaly 3 N81026 TBXS Holt-Oram Syndrome M78262 CBS Homocystinuria T0862205 GFAP Alexander Disease HUMCP401 TNTSF5 Hyper IgM Syndrome, X-Linked HUMDFTHR OM	M85904	FH	Fumarate Hydratase Deficiency
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T48672         GBA         Gaucher Disease           HSGCRAN         NR3C1         Glucocorticoid Resistance           S83839         G6PD         Glucose-6-Phosphate Dehydrogenase Deficiency           HSRNAGLK         GK         Glycerol Kinase Deficiency           U01120         G6PC         Glycogen Storage Disease Type II           HUMGAAA         GAA         Glycogen Storage Disease Type II           HUMHGBE         GBE1         Glycogen Storage Disease Type IV           HSPHOSR1         PYGM         Glycogen Storage Disease Type V           D12179         PYGL         Glycogen Storage Disease Type VI           HSHMPFK         PFKM         Glycogen Storage Disease Type VI           HUMGL3A         GLI3         GLI3-Related Disorders ; Greig Cephalopolysyndactyly Syndrome ; Pallister-Hall Syndrome           F09335         ATP2CI         Hailey-Hailey Disease           M62210         CCM1         Angiokeratoma Corporis Diffusum with Arteriovenous Fistulas ; Familial Cerebral Cavernous Malformation           T59431         HFE         HFE- Associated Hereditary Hemochromatosis           HSALK1A         ACVRL1         Hereditary Hemorrhagic Telangiectasia           HUMENDO         ENG         Hereditary Hemorrhagic Telangiectasia           HUMFVIII         F8         Hemophilia A	T53762	GALT	Galactosemia
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HUMPTHR F2 Prothrombin G20210A Thrombophilia OM	HUMCD40L		
OM	HUMPTHR		
T61466 MTHFR MTHFR Deficiency ;MTHFR Thermolabile Variant			
	T61466	MTHFR	MTHFR Deficiency ;MTHFR Thermolabile Variant

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HUMSKM1	SCN4A	Hyperkalemic Periodic Paralysis Type 1 ;Hypokalemic Periodic Paralysis
A		¡Hypokalemic Periodic Paralysis Type 2 ;Myotonia Congenita, Dominant
		;Paramyotonia Congenita
HSU09784	CACNA1S	Hypokalemic Periodic Paralysis ;Hypokalemic Periodic Paralysis Type 1
113009764	CACIVAIS	;Malignant Hyperthermia Susceptibility
HUMLPLA A	LPL	Familial Lipoprotein Lipase Deficiency
HUMPEX	PHEX	Hypophosphatemic Rickets, X-Linked Dominant
M78626	STS	Ichthyosis, X-Linked
R56102	IKBKG	Incontinentia Pigmenti
Z39843	IVD	Isovaleric Acidemia
S60085S1	KAL1	Kallmann Syndrome, X-Linked
T55061	KEL	Kell Antigen Genotyping
HUMGALC	GALC	Krabbe Disease
HUMZFPSR		Myotonic Dystrophy Type 2
EB		lyotomo Dystrophy Typo 2
Z19342	KIF1B	Charcot-Marie-Tooth Neuropathy Type 2
T11351	NPC2	Niemann-Pick Disease Type C
Z39096	NDRG1	Charcot-Marie-Tooth Neuropathy Type 4
AA984421	PRX	Charcot-Marie-Tooth Neuropathy Type 4 ;Charcot-Marie-Tooth Neuropathy
AA704421	ITKA	Type 4F
HUMRETG C	GUCY2D	Leber Congenital Amaurosis
HSU18991	DDECE	Y along Community I Amount of Patients Discount on Autonomal December
HSO18991	RPE65	Leber Congenital Amaurosis ;Retinitis Pigmentosa, Autosomal Recessive
C16899	MTND6	Leber Hereditary Optic Neuropathy ;Mitochondrial Disorders ;Mitochondrial
	1	DNA-Associated Leigh Syndrome and NARP
AA069417	MTND4	Leber Hereditary Optic Neuropathy ;Mitochondrial Disorders ;Mitochondrial
111005-117	1411124	DNA-Associated Leigh Syndrome and NARP
HUMCYP3A	MTNIDA	Leber Hereditary Optic Neuropathy ;Mitochondrial Disorders ;Mitochondrial
HUMCIFSA	MIIND4	DNA-Associated Leigh Syndrome and NARP
		DNA-Associated Leigh Symptome and NARF
HSCPHC22	MTND1	Leber Hereditary Optic Neuropathy ;Mitochondrial Disorders ;Mitochondrial
i		DNA-Associated Leigh Syndrome and NARP
HUMHPRT	HPRT1	Lesch-Nyhan Syndrome
HUMLHHC	LHCGR	Leydig Cell Hypoplasia/Agenesis; Male-Limited Precocious Puberty
GR		
HSP53	TP53	Li-Fraumeni Syndrome
Z19198	HADHB	Long Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency
		, , , , , , , , , , , , , , , , , , , ,
M79018	HADHA	Long Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency
R72332	HADHA	Long Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency
K/2332	HADHA	Long Cham 5-riyuroxyacyi-CoA Denyurogenase Denciency
W93500	KCNQ1	Atrial Fibrillation; Jervell and Lange-Nielsen Syndrome; LQT 1; Romano-
		Ward Syndrome
S62085	OCRL	Lowe Syndrome
T48981	FBN1	Marfan Syndrome
HUMASFB	ARSB	Mucopolysaccharidosis Type VI

M62202	GNAS	Albright Hereditary Osteodystrophy ;McCune-Albright Syndrome ;Osseus
		Heteroplasia, Progressive
N46342	SACS	ARSACS
T81605	FANCD2	Fanconi Anemia
H47777	FANCD1	Fanconi Anemia
T23877	ACADM	Medium Chain Acyl-Coenzyme A Dehydrogenase Deficiency
AA906866	PARK2	Parkin Type of Juvenile Parkinson Disease
BE140729	GЈВ4	Erythrokeratodermia Variabilis
HSU26727	CDKN2A	Familial Malignant Melanoma
T47218	SPINK5	Netherton Syndrome
HSMNKMB P	ATP7A	ATP7A-Related Copper Transport Disorders
R37821	SHFM4	Ectrodactyly
Z38987	GSN	Amyloidosis V
HSARYA	ARSA	Chromosome 22q13.3 Deletion Syndrome ;Metachromatic Leukodystrophy
S68531	COL10A1	Metaphyseal Chondrodysplasia, Schmid Type
T59742	CACNA1A	Episodic Ataxia Type 2 ;Familial Hemiplegic Migraine ;Spinocerebellar Ataxia Type 6
HSCP2	HPS3	Hermansky-Pudlak Syndrome ;Hermansky-Pudlak Syndrome 3
R21301	HPS3	Hermansky-Pudlak Syndrome ;Hermansky-Pudlak Syndrome 3
HUMBGAL RP	GLB1	GM1 Gangliosidosis ;Mucopolysaccharidosis Type IVB
HSU12507	KCNJ2	Andersen Syndrome
R28488	MEN1	Multiple Endocrine Neoplasia Type 1
HUMCOMP	COMP	COMP-Related Multiple Epiphyseal Dysplasia; Multiple Epiphyseal Dysplasia, Dominant; Pseudoachondroplasia
H30258	COL9A2	Multiple Epiphyseal Dysplasia, Dominant
T48133	EXT1	Hereditary Multiple Exostoses ; Multiple Exostoses, Type I
T06129	EXT2	Hereditary Multiple Exostoses ;Multiple Exostoses, Type II
T05624	LAMA2	Congenital Muscular Dystrophy with Merosin Deficiency
HSDYSTIA	DMD	Duchenne/Becker Muscular Dystrophy ;Dystrophinopathies ;X-Linked Dilated Cardiomyopathy
HSSTA	EMD	Emery-Dreifuss Muscular Dystrophy, X-Linked
HSU20165	BMPR2	Primary Pulmonary Hypertension
M79239	CAPN3	Calpainopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive
HSU34976	SGCG	Gamma-Sarcoglycanopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive ; Sarcoglycanopathies
HUMADHA	SGCA	Alpha-Sarcoglycanopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive ; Sarcoglycanopathies
AI340083	SGCA	Alpha-Sarcoglycanopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive ; Sarcoglycanopathies
Z25374	SGCB	Beta-Sarcoglycanopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive ; Sarcoglycanopathies

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N29439	SGCD	Delta-Sarcoglycanopathy; Dilated Cardiomyopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive ; Sarcoglycanopathies
N56180	CASQ2	Catecholaminergic Ventricular Tachycardia, Autosomal Recessive
!		
T23560	CHRNB2	Nocturnal Frontal Lobe Epilepsy, Autosomal Dominant
HSCHRNA4 4	CHRNA4	Nocturnal Frontal Lobe Epilepsy, Autosomal Dominant
M78654	CHRNA4	Nocturnal Frontal Lobe Epilepsy, Autosomal Dominant
T86329	CDH23	Usher Syndrome Type 1
D11677	PABPN1	Oculopharyngeal Muscular Dystrophy
AW449267	PCDH15	Usher Syndrome Type 1
HUMCLC	CLCN1	Myotonia Congenita, Dominant ; Myotonia Congenita, Recessive
S86455	DMPK	Myotonic Dystrophy Type 1
T70260	MTM1	Myotubular Myopathy, X-Linked
T12579	LMX1B	Nail-Patella Syndrome
HSTRKT1	TPM3	Nemaline Myopathy
HUMTROPC K	ТРМ3	Nemaline Myopathy
Z19248	NEB	Nemaline Myopathy
AF030626	AVPR2	Nephrogenic Diabetes Insipidus ;Nephrogenic Diabetes Insipidus, X-Linked
AA780862	NPHS1	Congenital Finnish Nephrosis
T08860	ABCC8	ABCC8-Related Hyperinsulinism; Familial Hyperinsulinism
AA679741	KCNJ11	Familial Hyperinsulinism ;KCNJ11-Related Hyperinsulinism
M77935	NF1	Neurofibromatosis 1
HSMEORPR A	NF2	Neurofibromatosis 2
T08995	CLN3	CLN3-Related Neuronal Ceroid-Lipofuscinosis ;Neuronal Ceroid- Lipofuscinoses
T72120	CLN2	CLN2-Related Neuronal Ceroid-Lipofuscinosis ;Neuronal Ceroid- Lipofuscinoses
T41059	GRHPR	Hyperoxaluria, Primary, Type 2
HUMGCRF	FCGR3A	Neutrophil Antigen Genotyping
C	) TOO!	
R21657	NPC1	Niemann-Pick Disease Type C; Niemann-Pick Disease Type C1
M77961	SMPD1	Niemann-Pick Disease Due to Sphingomyelinase Deficiency
T87256	SUOX	Sulfocysteinuria
D79813	SOST	SOST-Related Sclerosing Bone Dysplasias
T94707	MATN3	Multiple Epiphyseal Dysplasia, Dominant
HSCOL9AL	COL9A1	Multiple Epiphyseal Dysplasia, Dominant
	TNNT1	Nemaline Myopathy
Z19459	TPM2	Nemaline Myopathy
D11793	SLC2A1	Glucose Transporter Type 1 Deficiency Syndrome
	NDP	Norrie Disease
T62791	OPA1	Optic Atrophy 1
Z24812	OFD1	Oral-Facial-Digital Syndrome Type I
HUMOTC	OTC	Ornithine Transcarbamylase Deficiency
	MKKS	Bardet-Biedl Syndrome ;McKusick-Kaufman Syndrome
Z19438	CHAC	Choreoacanthocytosis

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HUMRDSA	RDS	Patterned Dystrophy of Retinal Pigment Epithelium; Retinitis Pigmentosa, Autosomal Dominant
Z30072	PLP1	Hereditary Spastic Paraplegia, X-Linked ;PLP-Related Disorders
HSFGR11G	FGFR1	FGFR-Related Craniosynostosis Syndromes; Pfeiffer Syndrome Type 1, 2, and 3
HUMPHH	PAH	Phenylalanine Hydroxylase Deficiency
HSKITCR	KIT	Gastrointestinal Stromal Tumor ; Piebaldism
HSGROW1	GH1	Pituitary Dwarfism I
F00079	GHR	Pituitary Dwarfism II
HSPIT1	POU1F1	Pituitary-Specific Transcription Factor Defects (PIT1)
T58874	SDHD	Familial Nonchromaffin Paragangliomas
HUMINTB3	ITGB3	Integrin, Beta 3 ;Platelet Antigen Genotyping
T09245	PKD1	Polycystic Kidney Disease 1, Autosomal Dominant ;Polycystic Kidney Disease, Autosomal Dominant
T55657.	PKD2	Polycystic Kidney Disease 2, Autosomal Dominant ;Polycystic Kidney Disease, Autosomal Dominant
T77325	PKD2	Polycystic Kidney Disease 2, Autosomal Dominant; Polycystic Kidney Disease, Autosomal Dominant
W27963	PKD2	Polycystic Kidney Disease 2, Autosomal Dominant; Polycystic Kidney Disease, Autosomal Dominant
R05352	PKHD1	Polycystic Kidney Disease, Autosomal Recessive
M77871	PCLD	Polycystic Liver Disease
M78097	UROD	Porphyria Cutanea Tarda
HUMPBG	HMBS	Acute Intermittent Porphyria
HUMRODS A	UROS	Congenital Erythropoietic Porphyria
T10891	AGT	Angiotensinogen
T67463	CTSK	Pycnodysostosis
M77954	PDHA1	Pyruvate Dehydrogenase Deficiency, X-linked
Z19400	PHYH	Refsum Disease, Adult
R07476	PEX1	Zellweger Syndrome Spectrum
Z24965	RCA1	Renal Cell Carcinoma
H37900	RHO	Retinitis Pigmentosa, Autosomal Dominant ;Retinitis Pigmentosa, Autosomal Recessive
T24020	RB1	Retinoblastoma
Z44098	RS1	X-Linked Juvenile Retinoschisis
H84683	RS1	X-Linked Juvenile Retinoschisis
HSRH30A	RHCE	Rh C Genotyping ;Rh E Genotyping
S57971	RHCE	Rh C Genotyping; Rh E Genotyping
AI282496	RHCE	Rh C Genotyping; Rh E Genotyping
T11224	RHCE	Rh C Genotyping ;Rh E Genotyping
R60192	PEX7	Refsum Disease, Adult ;Rhizomelic Chondrodysplasia Punctata Type 1
HUMMLC1 AA	MLC1	Megalencephalic Leukoencephalopathy with Subcortical Cysts
M79106	MLC1	Megalencephalic Leukoencephalopathy with Subcortical Cysts
T64905	PITX2	Anophthalmia ;Peters Anomaly ;Rieger Syndrome
Z41163	CREBBP	Rubinstein-Taybi Syndrome
HSBHLH	TWIST1	Saethre-Chotzen Syndrome
F00367	EIF2B1	Childhood Ataxia with Central Nervous System Hypomyelination/Vanishing White Matter
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Z20030	EIF2B2	Childhood Ataxia with Central Nervous System Hypomyelination/Vanishing
220050	LIN ZDZ	White Matter
Z41323	EIF2B3	Childhood Ataxia with Central Nervous System Hypomyelination/Vanishing
241323	EIFZES	White Matter
717000	EIEOD4	
Z17882	EIF2B4	Childhood Ataxia with Central Nervous System Hypomyelination/Vanishing
		White Matter
R13846	EIF2B5	Childhood Ataxia with Central Nervous System Hypomyelination/Vanishing
		White Matter ;Cree Leukoencephalopathy
	******	G H MP
T03917	HEXB	Sandhoff Disease
HUMSRYA	SRY	XX Male Syndrome ;XY Gonadal Dysgenesis
HUMSCAD	ACADS	Short Chain Acyl-CoA Dehydrogenase Deficiency
HSALAS2R	ALAS2	Sideroblastic Anemia, X-Linked
T47846	GPC3	Simpson-Golabi-Behmel Syndrome
T11069	GUSB	Mucopolysaccharidosis Type VII
T08813	SPG3A	Hereditary Spastic Paraplegia, Dominant ;SPG 3
Z21409	SPG3A	Hereditary Spastic Paraplegia, Dominant ;SPG 3
M77964	SPG4	Hereditary Spastic Paraplegia, Dominant ;SPG 4
N36808	SMN1	Spinal Muscular Atrophy
Z38265	SMN1	Spinal Muscular Atrophy
T06490	SCA1	Spinocerebellar Ataxia Type 1
T55469	SCA2	Spinocerebellar Ataxia Type 2
Z41764	SCA2	Spinocerebellar Ataxia Type 2
T61453	MJD	Spinocerebellar Ataxia Type 3
HUMELASF	ELN	Cutis Laxa, Autosomal Dominant ;Supravalvular Aortic Stenosis
T05070	TITEN A	II
T05970	HEXA	Hexosaminidase A Deficiency
M79184	THRB	Thyroid Hormone Resistance
Z20729 R48739	TCOF1 TRPS1	Treacher Collins Syndrome
T77655	TSC1	Trichorhinophalangeal Syndrome Type I
M78940	TSC2	Tuberous Sclerosis 1 ;Tuberous Sclerosis Complex Tuberous Sclerosis 2 ;Tuberous Sclerosis Complex
HSFAA	FAH	Tyrosinemia Type I
T39510	TBX3	Ulnar-Mammary Syndrome
HUMM7AA	MYO7A	Usher Syndrome Type 1
W22160	USH1C	Usher Syndrome Type 1 Usher Syndrome Type 1
T08506	ACADVL	Very Long Chain Acyl-CoA Dehydrogenase Deficiency
HUMHIPLI	VHL	Von Hippel-Lindau Syndrome
ND	VIIL	Von Emplei-Emdau Syndrome
HUMVWF	VWF	Von Willebrand Disease
HSU02368	PAX3	Waardenburg Syndrome Type I
N64051	WRN	Werner Syndrome
HUMWND	ATP7B	Wilson Disease
T40645	WAS	WAS-Related Disorders
HSLAL	LIPA	Wolman Disease
HSASL1	ASL	Argininosuccinicaciduria
HSAGAGEN	AGA	Aspartylglycosaminuria
E		1. soper-y-bety community
T88756	ATD	Asphyxiating Thoracic Dystrophy
Z19164	ASAH	Farber Disease
HUMALD	FBP1	Fructose 1,6 Bisphosphatase Deficiency
HSLDHAR	LDHA	Lactate Dehydrogenase Deficiency
M77886	LDHB	Lactate Dehydrogenase Deficiency
HSU13680	LDHC	Lactate Dehydrogenase Deficiency
Z46189	MAN2B1	Alpha-Mannosidosis
		1 = anguine and and vive vive vive

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M79249	MANBA	Beta-Mannosidosis
H26723	GALNS	Mucopolysaccharidosis Type IVA
H23053	SLC26A4	DFNB 4 ;Enlarged Vestibular Aqueduct Syndrome ;Nonsyndromic Hearing
		Loss and Deafness, Autosomal Recessive ; Pendred Syndrome
HSPGK1	PGK1	Phosphoglycerate Kinase Deficiency
HSU08818	MET	Papillary Renal Carcinoma
M79231	PRCC	Papillary Renal Carcinoma
T08200	GNS	Mucopolysaccharidosis Type IIID
HUMNAGB	NAGA	Schindler Disease
T08881	NEU1	Mucolipidosis I
R81783	SLC17A5	Free Sialic Acid Storage Disorders
HUMAUTO	MTATP6	Mitochondrial Disorders ; Mitochondrial DNA-Associated Leigh Syndrome
NH		and NARP
F09306	SCA7	Spinocerebellar Ataxia Type 7
AF248482	DAZ	Y Chromosome Infertility
HSU21663	DAZ	Y Chromosome Infertility
T47024	JAG1	Alagille Syndrome
HSRYRRM1	RBMY1A1	Y Chromosome Infertility
HSRYRRM2	RBMY1A1	Y Chromosome Infertility
HSVD3R	VDR	Osteoporosis ;Rickets-Alopecia Syndrome
T40157	FMO3	Trimethylaminuria
HUMPHOSL	PPGB	Galactosialidosis
IP		
HUMPPR	PPGB	Galactosialidosis
H22222	FANCC	Fanconi Anemia
D12009	RPS6KA3	Coffin-Lowry Syndrome
M78282	PTEN	PTEN Hamartoma Tumor Syndrome (PHTS)
M78802	FY	Duffy Antigen Genotyping
HSU04270	KCNH2	LQT 2 ;Romano-Ward Syndrome
T19733	SCN5A	Brugada Syndrome ;LQT 3 ;Romano-Ward Syndrome
HSTFIIDX	TBP	Spinocerebellar Ataxia Type17
HUMKCHA	KCNA1	Episodic Ataxia Type 1
HSU78110	NRTN	Hirschsprung Disease
HSET3AA	EDN3	Hirschsprung Disease
Z17351	ECE1	Hirschsprung Disease
T47284	DHCR7	Smith-Lemli-Opitz Syndrome
HUMXIHB	HBZ	Alpha-Thalassemia
HSCP2	CP	Aceruloplasminemia
N25320	CLN6	CLN6-Related Neuronal Ceroid-Lipofuscinosis ;Neuronal Ceroid-
		Lipofuscinoses
T11340	NBS1	Nijmegen Breakage Syndrome
Z40114	NBS1	Nijmegen Breakage Syndrome
HSU03688	CYP1B1	Glaucoma, Recessive (Congenital) ;Peters Anomaly
D62980	MYOC	Glaucoma, Dominant (Juvenile Onset)
T98453	NAGLU	Mucopolysaccharidosis Type IIIB
AA779817	RUNX2	Cleidocranial Dysplasia
HUMCBFA	RUNX2	Cleidocranial Dysplasia
HSMAREN O	MEFV	Familial Mediterranean Fever
F02180	PHKB	Phosphorylase Kinase Deficiency of Liver and Muscle
D11905	HPS1	Hermansky-Pudlak Syndrome ;Hermansky-Pudlak Syndrome 1
R95987	CRX	Retinitis Pigmentosa, Autosomal Dominant
T05762	EVC	Ellis-van Creveld Syndrome

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T12126	FLNA	Frontometaphyseal Dysplasia ;Melnick-Needles Syndrome ;Otopalatodigital
		Syndrome ;Periventricular Heterotopia, X-Linked
T60913	EBP	Chondrodysplasia Punctata, X-Linked Dominant
HSHNF4	HNF4A	Maturity-Onset Diabetes of the Young Type I
HUMBGLU	GCK	Familial Hyperinsulinism; GCK-Related Hyperinsulinism; Maturity-Onset
KIN		Diabetes of the Young Type II
M62026	GCK	Familial Hyperinsulinism; GCK-Related Hyperinsulinism; Maturity-Onset
		Diabetes of the Young Type II
R94860	CIAS1	Chronic Infantile Neurological Cutaneous and Articular Syndrome ;Familial
		Cold Urticaria ;Muckle-Wells Syndrome
		•
T08221	SMARCAL	Schimke Immunoosseous Dysplasia
	1	
T95621	SLC25A15	Hyperornithinemia-Hyperammonemia-Homocitrullinuria Syndrome
HUMOATC	OAT	Ornithine Aminotransferase Deficiency
R08989	MLYCD	Malonyl-CoA Decarboxylase Deficiency
N35888	PMM2	Congenital Disorders of Glycosylation
HSRPMI	MPI	Congenital Disorders of Glycosylation
HSSRECV6	MGAT2	Congenital Disorders of Glycosylation
T91755	MGAT2	Congenital Disorders of Glycosylation
HSCPTI	CPTIA	Carnitine Palmitoyltransferase IA (liver) Deficiency
D12096	CPT2	Carnitine Palmitoyltransferase II Deficiency
HSA1ATCA	SERPINA1	Alpha-1-Antitrypsin Deficiency
N36808	SMN2	Spinal Muscular Atrophy
Z38265	SMN2	Spinal Muscular Atrophy
HUMACAD	ACADL	Long Chain Acyl-CoA Dehydrogenase Deficiency
L		
Z25247	CACT	Carnitine-Acylcarnitine Translocase Deficiency
HUMETFA	ETFA	Glutaricacidemia Type 2
HSETFBS	ETFB	Glutaricacidemia Type 2
S69232	ETFDH	Glutaricacidemia Type 2
T09377	MEB	Muscle-Eye-Brain Disease
Z40427	G6PT1	Glycogen Storage Disease Type Ib
AI002801	SLC14A1	Kidd Genotyping
Z19313	SLC14A1	Kidd Genotyping
HUMPGAM M	PGAM2	Phosphoglycerate Mutase Deficiency
H86930	MPP4	Retinitis Pigmentosa, Autosomal Recessive
HSU14910	RGR	Retinitis Pigmentosa, Autosomal Recessive
AA775466	CARD15	Crohn Disease
AA306952	GAN	Giant Axonal Neuropathy
T99245	CLCN5	Dent Disease
T23537	NR3C2	Pseudohypoaldosteronism Type 1, Dominant
HSLASNA	SCNN1A	Pseudohypoaldosteronism Type 1, Recessive
H26938	SCNN1B	Pseudoaldosteronism; Pseudohypoaldosteronism Type 1, Recessive
		2 sound made in the state of th
HUMGAMM	SCNNIG	Pseudoaldosteronism; Pseudohypoaldosteronism Type 1, Recessive
TOWORWIN		1 source of the state of the
HSP450AL	CVD11D2	Femilial II-m and destruction Tune 1 . F 11-1 II 14-4 15 20 2
DSC430AL	CYP11B2	Familial Hyperaldosteronism Type 1; Familial Hypoaldosteronism Type 2
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HUMCYPA	CYP11B1	Familial Hyperaldosteronism Type 1
DA AF017089	COLITA	Ctickles Camdromo Ctickles Condens T
WL011093	COL11A1	Stickler Syndrome Type II

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HUMCA1XI A	COL11A1	Stickler Syndrome ;Stickler Syndrome Type II
	COL11A2	Stickler Syndrome
S61523	PIGA	Paroxysmal Nocturnal Hemoglobinuria
T58881	PHKA2	Glycogen Storage Disease Type IX
Z39614	DHAPAT	Rhizomelic Chondrodysplasia Punctata Type 2
N89899	SH2D1A	Lymphoproliferative Disease, X-Linked
HUMUGT1F A		Gilbert Syndrome
HUMNC1A	COL7A1	Epidermolysis Bullosa Dystrophica, Bart Type ;Epidermolysis Bullosa Dystrophica, Cockayne-Touraine Type ;Epidermolysis Bullosa Dystrophica, Hallopeau-Siemens Type ;Epidermolysis Bullosa Dystrophica, Pasini Type ;Epidermolysis Bullosa, Pretibial
T49684	ITGB4	Epidermolysis Bullosa Letalis with Pyloric Atresia
S66196	ITGA6	Epidermolysis Bullosa Letalis with Pyloric Atresia
T10988	LAMC2	Epidermolysis Bullosa Junctional, Herlitz-Pearson Type
HUMLAMA A	LAMA3	Epidermolysis Bullosa Junctional, Herlitz-Pearson Type
Z24848	LAMA3	Epidermolysis Bullosa Junctional, Herlitz-Pearson Type
T10484	LAMB3	Epidermolysis Bullosa Junctional, Disentis Type ;Epidermolysis Bullosa Junctional, Herlitz-Pearson Type
HUMBP180 AA	COL17A1	Epidermolysis Bullosa Junctional, Disentis Type
M78889	PLEC1	Epidermolysis Bullosa with Muscular Dystrophy
Z38659	SLC22A5	Carnitine Deficiency, Systemic
T85099	CTNS	Cystinosis
W27253	CNGA3	Achromatopsia ;Achromatopsia 2
HSU66088	SLC5A5	Thyroid Hormonogenesis Defect I
HUMTEKRP TK	TEK	Venous Malformation, Multiple Cutaneous and Mucosal
R69741	SLC26A2	Achondrogenesis Type 1B; Atelosteogenesis Type 2; Diastrophic Dysplasia; Multiple Epiphyseal Dysplasia, Recessive
R70146	PEX10	Zellweger Syndrome Spectrum
S55790	COL4A3	Alport Syndrome; Alport Syndrome, Autosomal Recessive
HSCOL4A4	COL4A4	Alport Syndrome ;Alport Syndrome, Autosomal Recessive
T10559	SHFM3	Ectrodactyly
T99040	FANCA	Fanconi Anemia
H47777	FANCB	Fanconi Anemia
AA542822	FANCE	Fanconi Anemia
HUMPSPB	PSAP	Metachromatic Leukodystrophy
HUMSAPA1	PSAP	Metachromatic Leukodystrophy
S69686	PSAP	Metachromatic Leukodystrophy
AA252786	NCF1	Chronic Granulomatous Disease
	NCF1	Chronic Granulomatous Disease
HSTGFB1	TGFB1	Camurati-Engelmann Disease
R24242	CYBA	Chronic Granulomatous Disease
	NCF2	Chronic Granulomatous Disease
S41458	PDE6B	Retinitis Pigmentosa, Autosomal Recessive
AA002150	PDE6B	Retinitis Pigmentosa, Autosomal Recessive
R21727	DYSF	Dysferlinopathy; Limb-Girdle Muscular Dystrophies, Autosomal Recessive
AF055580	USH2A	Usher Syndrome Type 2 ;Usher Syndrome Type 2A

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N36632	MITF	Waardenburg Syndrome Type II ; Waardenburg Syndrome Type IIA
M78027	МҮН9	DFNA 17; Epstein Syndrome; Fechtner Syndrome; May-Hegglin Anomaly; Sebastian Syndrome
Z40194	HPS4	Hermansky-Pudlak Syndrome
AA333774	GP1BA	Platelet Antigen Genotyping
M79110	GP1BB	Platelet Antigen Genotyping
HUMGPIIB	ITGA2B	Platelet Antigen Genotyping
A		
T29174	ITGA2	Glycoprotein 1a Deficiency ;Platelet Antigen Genotyping
HSGST4	GSTM1	Lung Cancer
AA773443	CHEK2	Li-Fraumeni Syndrome
T78869	CHEK2	Li-Fraumeni Syndrome
T03839	SH3BP2	Cherubism
T67412	IRF6	IRF6-Related Disorders
AB037973	FGF23	Hypophosphatemic Rickets, Dominant
T60199	FBLN5	Cutis Laxa, Autosomal Recessive
T03890	ARX	ARX-Related Disorders
M79175	NSD1	Sotos Syndrome
T07860	NSD1	Sotos Syndrome
M79181	COH1	Cohen Syndrome
MIHS75KD	NDUFS1	Leigh Syndrome (nuclear DNA mutation); Mitochondrial Respiratory Chain
A		Complex I Deficiency
T09312	NDUFV1	Leigh Syndrome (nuclear DNA mutation); Mitochondrial Respiratory Chain Complex I Deficiency
AA399371	SALL4	Acrorenoocular Syndrome ;Okihiro Syndrome
HUMA8SEQ	TIMP3	Pseudoinflammatory Fundus Dystrophy
Z40623	GDAP1	Charcot-Marie-Tooth Neuropathy Type 4; Charcot-Marie-Tooth Neuropathy Type 4A
AA128030	FOXL2	Blepharophimosis, Epicanthus Inversus, Ptosis
HUMCRTR	SLC6A8	Creatine Deficiency Syndrome, X-Linked
T08882	ЈРН3	Huntington Disease-Like 2
T07283	SNRPN	Autistic Disorder; Pervasive Developmental Disorders
Z38837	SPR	Sepiapterin Reductase Deficiency (SR)
HUMANTIR		Angiotensin II Receptor, Type 1
T46961	SEPN1	Congenital Muscular Dystrophy with Early Spine Rigidity; Multiminicore Disease
Z43954	TRIM32	Limb-Girdle Muscular Dystrophies, Autosomal Recessive
Z19219	TTID	Limb-Girdle Muscular Dystrophies, Autosomal Dominant
HSECADH	CDH1	Hereditary Diffuse Gastric Cancer
Z41199	WFS1	Nonsyndromic Low-Frequency Sensorineural Hearing Loss ; Wolfram Syndrome
HUMLORA A	LOR	Progressive Symmetric Erythrokeratoderma
Z38324	HR	Alopecia Universalis ;Papular Atrichia
Т09039	RYR1	Central Core Disease of Muscle ;Malignant Hyperthermia Susceptibility ;Multiminicore Disease
T10442	GALE	Galactose Epimerase Deficiency
D82541	PDB2	Paget Disease of Bone
HSU20759	CASR	Autosomal Dominant Hypocalcemia ;Familial Hypocalciuric Hypercalcemia, Type I ;Familial Isolated Hypoparathyroidism ;Neonatal Severe Primary Hyperparathyroidism
AA071082	SALL1	Townes-Brocks Syndrome
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T81692	EDAR	Hypohidrotic Ectodermal Dysplasia ;Hypohidrotic Ectodermal Dysplasia, Autosomal
HUMHPA 1B	HP	Anhaptoglobinemia
HSU01922	TIMM8A	Deafness-Dystonia-Optic Neuronopathy Syndrome
HUMHSDI	HSD3B2	Prostate Cancer
HSU05659	HSD17B3	Prostate Cancer
Z38915	NPHP4	Nephronophthisis 4; Senior-Loken Syndrome
HSC1INHR	SERPING1	Hereditary Angioneurotic Edema
D62739	BBS7	Bardet-Biedl Syndrome
T64266	SLC7A7	<del></del>
	CTH	Lysinuric Protein Intolerance
S52028 Z30254	EFEMP1	Cystathioninuria
		Doyne Honeycomb Retinal Dystrophy ;Patterned Dystrophy of Retinal Pigment Epithelium
D59254	ELOVL4	Stargardt Disease 3
S43856	GCH1	Dopa-Responsive Dystonia ;GTP Cyclohydrolase 1-Deficient DRD ;GTP Cyclohydrolase-1 Deficiency (GTPCH)
M78468	PAFAH1B 1	17-Linked Lissencephaly
M78473	PAFAH1B	17-Linked Lissencephaly
S51033	MID1	Opitz Syndrome, X-Linked
Z40343	MID1	Opitz Syndrome, X-Linked
HUM6PTHS	PTS	Pyruvoyltetrahydropterin Synthase Deficiency
M62103	CIRH1A	North American Indian Childhood Cirrhosis
HSDHPR	QDPR	Dihydropteridine Reductase Deficiency (DHPR)
T23665	FKRP	Congenital Muscular Dystrophy Type 1C ;Limb-Girdle Muscular
		Dystrophies, Autosomal Recessive
T60498	LRPPRC	Leigh Syndrome, French-Canadian Type
BG772870	LRPPRC	Leigh Syndrome, French-Canadian Type
HSACHRA	CHRNA1	Congenital Myasthenic Syndromes
HSACHRB	CHRNB1	Congenital Myasthenic Syndromes
HSACHRG	CHRND	Congenital Myasthenic Syndromes
HSACETR	CHRNE	Congenital Myasthenic Syndromes
HSACRAP	RAPSN	Congenital Myasthenic Syndromes
M78334	COLQ	Congenital Myasthenic Syndromes
S56138	CHAT	Congenital Myasthenic Syndromes
D11584	SDHC	Familial Nonchromaffin Paragangliomas
HSPSTI	SPINK1	Hereditary Pancreatitis
HSSPROTR	PROS1	Protein S Heerlen Variant
HUMLAP	ITGB2	Leukocyte Adhesion Deficiency, Type 1
T12572	ADAMTS1	Familial Thrombotic Thrombocytopenia Purpura
HUMCOMII P	SDHB	Carotid Body Tumors and Multiple Extraadrenal Pheochromocytomas
NM005912	MC4R	Obesity
HUMPAX8 A	PAX8	Congenital Hypothyroidism
AA037119	FOXE1	Bamforth-Lazarus Syndrome ;Congenital Hypothyroidism
AV754057	FSHB	Isolated Follicle Stimulating Hormone Deficiency
HUMHOME OA	PCBD	Pterin-4a Carbinolamine Dehydratase Deficiency (PCD)
HSTHR	TH	Dopa-Responsive Dystonia ;Tyrosine Hydroxylase-Deficient DRD
AA219596	ZIC3	Heterotaxy Syndrome
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HSU20324	CSRP3	Dilated Cardiomyopathy
HUMPHLA	PLN	Dilated Cardiomyopathy
M		
F10219	ALMS1	Alstrom Syndrome
T06612	VCL	Dilated Cardiomyopathy
AF388366	USH3A	Usher Syndrome Type 3
Z40797	SGCE	Myoclonus-Dystonia
T08448	RAB7	Charcot-Marie-Tooth Neuropathy Type 2
D12383	GARS	Charcot-Marie-Tooth Neuropathy Type 2
Z36734	HRPT2	HRPT2-Related Disorders
H19914	EDARAD	Hypohidrotic Ectodermal Dysplasia; Hypohidrotic Ectodermal Dysplasia,
	D	Autosomal
T08852	PPT1	Neuronal Ceroid-Lipofuscinoses ;PPT1-Related Neuronal Ceroid- Lipofuscinosis
HUMDRA	SLC26A3	Familial Chloride Diarrhea
R16324	AGPAT2	Berardinelli-Seip Congenital Lipodystrophy
Z41967	BSCL2	Berardinelli-Seip Congenital Lipodystrophy
W28410	OPNIMW	Blue-Mono-Cone-Monochromatic Type Colorblindness
T27896	OPN1LW	Blue-Mono-Cone-Monochromatic Type Colorbindness
AI469991	PHOX2A	Congenital Fibrosis of Extraocular Muscles
HSFSTHR	FSHR	Premature Ovarian Failure, Autosomal Recessive
HSLPH	LCT	Hypolactasia, Adult Type
Z41000	BCS1L	
241000	BCSIL	Gracile Syndrome ;Mitochondrial Respiratory Chain Complex III Deficiency
HSCGJP	GJA1	Oculodentodigital Dysplasia
HSPERFP1	PRF1	Familial Hemophagocytic Lymphohistiocytosis 2
M78112	GLUD1	Familial Hyperinsulinism; GLUD1-Related Hyperinsulinism
Z39336	GLUD1	Familial Hyperinsulinism ;GLUD1-Related Hyperinsulinism
W79230	RAX	Anophthalmia
AF041339	PITX3	Anophthalmia
AA151708	HESX1	Anophthalmia
HSSOXB	SOX3	Anophthalmia ;Mental Retardation, X-Linked, with Growth Hormone
		Deficiency
HUMHMGB OX	SOX2	Anophthalmia
HSGM2APA	GM2A	GM2 Activator Deficiency
Z19280	GLCIE	Glaucoma, Dominant (Adult Onset)
T20165	PHF6	Borjeson-Forssman-Lehmann Syndrome
Z40394	CMT4B2	Charcot-Marie-Tooth Neuropathy Type 4
HUMIHH	IHH	Brachydactyly Type A1
HUMCDPK	CDK4	Familial Malignant Melanoma
T39355	SBDS	Shwachman-Diamond Syndrome
HSHMPLK	MPL	Amegakaryocytic Thrombocytopenia, Congenital
Z38860	TRIM37	Mulibrey Nanism
M62027	DTNA	Familial Isolated Noncompaction of Left Ventrical Myocardium
Z39175	DDB2	Xeroderma Pigmentosum
T09329	MUTYH	MYH-Associated Polyposis
HUMAPA	APP	Alzheimer Disease Type 1 ;Early-Onset Familial Alzheimer Disease
M79090	GSS	5-Oxoprolinuria
Z26981	OXCT	3-Oxoacid CoA Transferase
D12046	PMS1	Hereditary Non-Polyposis Colon Cancer
T08186	PMS2	Hereditary Non-Polyposis Colon Cancer
R20984	MSH6	Hereditary Non-Polyposis Colon Cancer
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	NDUFS4	Leigh Syndrome (nuclear DNA mutation); Mitochondrial Respiratory Chain Complex I Deficiency
	NDUFS8	Leigh Syndrome (nuclear DNA mutation)
M78107	SDHA	Leigh Syndrome (nuclear DNA mutation)
	NDUFS7	Leigh Syndrome (nuclear DNA mutation)
	PC	Pyruvate Carboxylase Deficiency
	AASS	Hyperlysinemia
	PEX3	Zellweger Syndrome Spectrum
	STK11	Peutz-Jeghers Syndrome
	HAL	Histidinemia
	ALDH4A1	Hyperprolinemia, Type II
	MADH4	Juvenile Polyposis Syndrome
	XPB	Xeroderma Pigmentosum
	XPD	Xeroderma Pigmentosum
	XPF	Xeroderma Pigmentosum
	XPG	Xeroderma Pigmentosum
	AUH	3-Methylglutaconic Aciduria Type 1
	MMAB	Methylmalonicaciduria
	MMAA	Methylmalonicaciduria
	BCAT1	Hyperleucine-Isoleucinemia
	BCAT2	Hyperleucine-Isoleucinemia
	SLC1A1	Dicarboxylicaminoaciduria
	PRODH	Hyperprolinemia, Type I
	EPM2A	Progressive Myoclonus Epilepsy, Lafora Type
	FANCF	Fanconi Anemia
	FANCF	Fanconi Anemia
	FANCG	Fanconi Anemia
	ED4	Ectodermal Dysplasia, Margarita Island Type
	KCNE1	Jervell and Lange-Nielsen Syndrome ;LQT 5 ;Romano-Ward Syndrome
HUMUMOD	UMOD	Familial Nephropathy with Gout ;Medullary Cystic Kidney Disease 2
HSU66583	CRYGD	Cataract, Crystalline Aculeiform
	PTHR1	Chondrodysplasia, Blomstrand Type
	MTRR	Homocystinuria-Megaloblastic Anemia
	ADSL	Adenylosuccinase deficiency
	SLC25A19	Amish Lethal Microcephaly
	SLC25A19	Amish Lethal Microcephaly
T11501	DBH	Dopamine Beta-Hydroxylase Deficiency
	NLGN3	Autistic Disorder ;Pervasive Developmental Disorders
	NLGN4	Autistic Disorder ;Pervasive Developmental Disorders
	ATP1A2	Familial Hemiplegic Migraine
	SPCH1	Severe Speech Delay
	PHOX2B	Congenital Central Hypoventilation Syndrome
BG723199	DSG4	Localized Autosomal Recessive Hypotrichosis
	HSD11B2	Apparent Mineralocorticoid Excess Syndrome
T46918	FTL	Hyperferritinemia Cataract Syndrome
T46918 HUMFERLS		Familial Pancreatic Cancer
T46918 HUMFERLS HUMCKRA SA	KRAS2	Paintiai I andicate Cancu
T46918 HUMFERLS HUMCKRA SA	KRAS2 PTPN11	LEOPARD Syndrome ;Noonan Syndrome
T46918 HUMFERLS HUMCKRA SA S39383		
T46918 HUMFERLS HUMCKRA SA S39383 HUMSTAR	PTPN11	LEOPARD Syndrome ;Noonan Syndrome
T46918 HUMFERLS HUMCKRA SA S39383 HUMSTAR Z20453	PTPN11 STAR	LEOPARD Syndrome ;Noonan Syndrome Cholesterol Desmolase Deficiency Cholesterol Desmolase Deficiency
T46918 HUMFERLS HUMCKRA SA S39383 HUMSTAR Z20453 HUMVPC	PTPN11 STAR STAR	LEOPARD Syndrome ;Noonan Syndrome Cholesterol Desmolase Deficiency

Gilford Progeria Syndrome; Limb-Girdle Muscular Dystrophies, Autosomal Dominant; Mandibuloacral Dysplasia  D12062  DSP  Cardiomyopathy, Dilated, with Woolly Hair and Keratoderma; Keratosis Palmoplantaris Striata  H99382  MSH3  Hereditary Non-Polyposis Colon Cancer  AW205295  NOG  AM18191  GJB3  Erythrokeratodermia Variabilis  F10278  PEO1  Mitochondrial DNA Deletion Syndromes  M62196  MSS1  Febrile Seizures  Mitochondrial Respiratory Chain Complex III Deficiency  A Charcot-Marie-Tooth Neuropathy Type 1; Charcot-Marie-Tooth Neuropathy Type 1D; Charcot-Marie-Tooth Neuropathy Type 4E  HSFLT4X  FLT4  Milroy Congenital Lymphedema  Z24968  PEX26  AA338362  ANKH  Craniometaphyseal Dysplasia, Dominant  HUMRPS24  A  RPS19  Diamond-Blackfan Anemia  HSACMHCP  MYH7  Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HUMTRO  TPM1  Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HUMTRO  TPM1  Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HSU09466  COX10  Leigh Syndrome (nuclear DNA mutation)  S72487  ECGF1  Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196  KIF5A  Hereditary Spastic Paraplegia, Dominant  Hominant  Grifford Progeria Autosocial Pystosis Cardiomyopathy  Hereditary Spastic Paraplegia, Dominant  Hominant  Homi			167
LITAF   Charcot-Marie-Tooth Neuropathy Type 1	HUMGENX	TNXB	Ehlers-Danlos-like Syndrome Due to Tenascin-X Deficiency
AA621310   FOXE3   Anophthalmia	R02385	TNXB	Ehlers-Danlos-like Syndrome Due to Tenascin-X Deficiency
AA621310   FOXE3   Anophthalmia	T39901	LITAF	Charcot-Marie-Tooth Neuropathy Type 1
H18132   CFC1			
R36719   EBAF   Heterotaxy Syndrome	H18132		
HSACTURE   ACVR2B	R36719		
TS2017   CRELD1   Heterotaxy Syndrome	HSACTURE		
D11851			
Palmoplantaris Striata	D11851	LMNA	Dilated Cardiomyopathy; Emery-Dreifuss Muscular Dystrophy, Autosomal Dominant; Familial Partial Lipodystrophy, Dunnigan Type; Hutchinson-Gilford Progeria Syndrome; Limb-Girdle Muscular Dystrophies, Autosomal
AA135181 GJB3 Erythrokeratodermia Variabilis F10278 PEO1 Mitochondrial DNA Deletion Syndromes  M62022 MASS1 Febrile Seizures HUMQBPC A Mitochondrial DNA Deletion Syndromes  HUMEGR2 A Mitochondrial Respiratory Chain Complex III Deficiency  A HUMEGR2 EGR2 Charcot-Marie-Tooth Neuropathy Type 1; Charcot-Marie-Tooth Neuropathy Type 4; Charcot-Marie-Tooth Neuropathy Type 4	D12062	DSP	Cardiomyopathy, Dilated, with Woolly Hair and Keratoderma ;Keratosis Palmoplantaris Striata
AV205295 NOG Multiple Synostoses Syndrome AA135181 GJB3 Erythrokeratodermia Variabilis F10278 PEO1 Mitochondrial DNA Deletion Syndromes M62022 MASS1 Febrile Seizures HUMQBPC A Mitochondrial Respiratory Chain Complex III Deficiency A HUMEGR2 EGR2 Charcot-Marie-Tooth Neuropathy Type 1; Charcot-Marie-Tooth Neuropathy Type 10; Charcot-Marie-Tooth Neuropathy Type 4; Charcot-Marie-Tooth Neuropathy Type 4 ; Ch	H99382	MSH3	Hereditary Non-Polyposis Colon Cancer
M62022   MASS1   Febrile Seizures	AW205295	NOG	
F10278   PEO1   Mitochondrial DNA Deletion Syndromes	AA135181	GJB3	Erythrokeratodermia Variabilis
M62022       MASS1       Febrile Seizures         HUMQBPC A       UQCRB A       Mitochondrial Respiratory Chain Complex III Deficiency         HUMEGR2 A       EGR2       Charcot-Marie-Tooth Neuropathy Type 1; Charcot-Marie-Tooth Neuropathy Type 1D; Charcot-Marie-Tooth Neuropathy Type 4 ; Charcot-Marie-Tooth Neuropathy Type 4E         HSFLT4X       FLT4       Milroy Congenital Lymphedema         Z24968       PEX26       Zellweger Syndrome Spectrum         A333862       ANKH       Craniometaphyseal Dysplasia, Dominant         HUMRPS24       RPS19       Diamond-Blackfan Anemia         HSACMHCP       MYH7       Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy         Z25920       TNNT2       Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy         HUMTRO       TPM1       Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy         HSU09466       COX10       Leigh Syndrome (nuclear DNA mutation)         S72487       ECGF1       Mitochondrial Neurogastrointestinal Encephalopathy Syndrome         M62196       KIF5A       Hereditary Spastic Paraplegia, Dominant         T07578       KIF5A       Hereditary Spastic Paraplegia, Dominant         T07578       KIF5A       Hereditary Spastic Paraplegia, Dominant         T47330       SOX18       Hypotrichosis-Lymphedema-Telangicctasia Syndrome	F10278	PEO1	Mitochondrial DNA Deletion Syndromes
A HUMEGR2 A Charcot-Marie-Tooth Neuropathy Type 1 ;Charcot-Marie-Tooth Neuropathy Type 1 ;Charcot-Marie-Tooth Neuropathy Type 4 ;Charcot-Marie-Tooth Neuropathy Type 1 ; Charcot-Marie-Tooth Neuropathy Type 1 ; C	M62022	MASS1	
Type 1D ;Charcot-Marie-Tooth Neuropathy Type 4 ;Charcot-Marie-Tooth Neuropathy Type 4E  HSFLT4X FLT4 Milroy Congenital Lymphedema Z24968 PEX26 Zellweger Syndrome Spectrum AA338362 ANKH Craniometaphyseal Dysplasia, Dominant HUMRPS24 RPS19 Diamond-Blackfan Anemia AT11633 RPS19 Diamond-Blackfan Anemia HSACMHCP MYH7 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  Z25920 TNNT2 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HUMTRO TPM1 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  Z18303 MYBPC3 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	A	UQCRB	Mitochondrial Respiratory Chain Complex III Deficiency
Z24968PEX26Zellweger Syndrome SpectrumAA338362ANKHCraniometaphyseal Dysplasia, DominantHUMRPS24 ARPS19Diamond-Blackfan AnemiaT11633RPS19Diamond-Blackfan AnemiaHSACMHCPMYH7Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyZ25920TNNT2Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyHUMTROTPM1Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyZ18303MYBPC3Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyHSU09466COX10Leigh Syndrome (nuclear DNA mutation)S72487ECGF1Mitochondrial Neurogastrointestinal Encephalopathy SyndromeM62196KIF5AHereditary Spastic Paraplegia, DominantT07578KIF5AHereditary Spastic Paraplegia, DominantD11648HSPD1Hereditary Spastic Paraplegia, DominantT47330SOX18Hypotrichosis-Lymphedema-Telangiectasia SyndromeAA448334CAV3Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal DominantAW071529ALX4Parietal Foramina 2M61973CD2APFocal Segmental Glomerulosclerosis		EGR2	Type 1D ;Charcot-Marie-Tooth Neuropathy Type 4 ;Charcot-Marie-Tooth
Z24968PEX26Zellweger Syndrome SpectrumAA338362ANKHCraniometaphyseal Dysplasia, DominantHUMRPS24 ARPS19Diamond-Blackfan AnemiaT11633RPS19Diamond-Blackfan AnemiaHSACMHCPMYH7Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyZ25920TNNT2Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyHUMTROTPM1Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyZ18303MYBPC3Dilated Cardiomyopathy; Familial Hypertrophic CardiomyopathyHSU09466COX10Leigh Syndrome (nuclear DNA mutation)S72487ECGF1Mitochondrial Neurogastrointestinal Encephalopathy SyndromeM62196KIF5AHereditary Spastic Paraplegia, DominantT07578KIF5AHereditary Spastic Paraplegia, DominantD11648HSPD1Hereditary Spastic Paraplegia, DominantT47330SOX18Hypotrichosis-Lymphedema-Telangiectasia SyndromeAA448334CAV3Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal DominantAW071529ALX4Parietal Foramina 2M61973CD2APFocal Segmental Glomerulosclerosis	HSFLT4X	FLT4	Milroy Congenital Lymphedema
AA338362 ANKH Craniometaphyseal Dysplasia, Dominant HUMRPS24 A  RPS19 Diamond-Blackfan Anemia  HSACMHCP MYH7 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  Z25920 TNNT2 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HUMTRO TPM1 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  Z18303 MYBPC3 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  HSPD1 Hereditary Spastic Paraplegia, Dominant  HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	Z24968	PEX26	Zellweger Syndrome Spectrum
HUMRPS24 A PS19 Diamond-Blackfan Anemia  T11633 RPS19 Diamond-Blackfan Anemia  HSACMHCP MYH7 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  Z25920 TNNT2 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HUMTRO TPM1 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  Z18303 MYBPC3 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	AA338362	ANKH	Craniometaphyseal Dysplasia, Dominant
HSACMHCP MYH7 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  Z25920 TNNT2 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HUMTRO TPM1 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  Z18303 MYBPC3 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	1.	RPS19	
Z25920 TNNT2 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HUMTRO TPM1 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  Z18303 MYBPC3 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	T11633	RPS19	Diamond-Blackfan Anemia
HUMTRO TPM1 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  Z18303 MYBPC3 Dilated Cardiomyopathy; Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	HSACMHCP	МҮН7	Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy
Z18303 MYBPC3 Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy  HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation)  S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	Z25920	TNNT2	Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy
HSU09466 COX10 Leigh Syndrome (nuclear DNA mutation) S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant T07578 KIF5A Hereditary Spastic Paraplegia, Dominant D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome AA448334 CAV3 Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2 M61973 CD2AP Focal Segmental Glomerulosclerosis	HUMTRO	TPM1	Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy
S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant T07578 KIF5A Hereditary Spastic Paraplegia, Dominant D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome AA448334 CAV3 Caveolinopathy; Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2 M61973 CD2AP Focal Segmental Glomerulosclerosis	Z18303	МҮВРС3	Dilated Cardiomyopathy ;Familial Hypertrophic Cardiomyopathy
S72487 ECGF1 Mitochondrial Neurogastrointestinal Encephalopathy Syndrome  M62196 KIF5A Hereditary Spastic Paraplegia, Dominant  T07578 KIF5A Hereditary Spastic Paraplegia, Dominant  D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant  T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome  AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis	HSU09466	COX10	Leigh Syndrome (nuclear DNA mutation)
T07578KIF5AHereditary Spastic Paraplegia, DominantD11648HSPD1Hereditary Spastic Paraplegia, DominantT47330SOX18Hypotrichosis-Lymphedema-Telangiectasia SyndromeAA448334CAV3Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal DominantAW071529ALX4Parietal Foramina 2M61973CD2APFocal Segmental Glomerulosclerosis	S72487		Mitochondrial Neurogastrointestinal Encephalopathy Syndrome
T07578KIF5AHereditary Spastic Paraplegia, DominantD11648HSPD1Hereditary Spastic Paraplegia, DominantT47330SOX18Hypotrichosis-Lymphedema-Telangiectasia SyndromeAA448334CAV3Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal DominantAW071529ALX4Parietal Foramina 2M61973CD2APFocal Segmental Glomerulosclerosis	M62196	KIF5A	Hereditary Spastic Paraplegia, Dominant
D11648 HSPD1 Hereditary Spastic Paraplegia, Dominant T47330 SOX18 Hypotrichosis-Lymphedema-Telangiectasia Syndrome AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2 M61973 CD2AP Focal Segmental Glomerulosclerosis			Hereditary Spastic Paraplegia, Dominant
T47330SOX18Hypotrichosis-Lymphedema-Telangiectasia SyndromeAA448334CAV3Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal DominantAW071529ALX4Parietal Foramina 2M61973CD2APFocal Segmental Glomerulosclerosis			
AA448334 CAV3 Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant  AW071529 ALX4 Parietal Foramina 2  M61973 CD2AP Focal Segmental Glomerulosclerosis			
M61973 CD2AP Focal Segmental Glomerulosclerosis	AA448334		Caveolinopathy ;Limb-Girdle Muscular Dystrophies, Autosomal Dominant
	AW071529	ALX4	Parietal Foramina 2
	W21801	NR2E3	Enhanced S-Cone Syndrome

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Z20305	TREM2	PLOSL		
T05421	ANK2	LQT 4 ;Romano-Ward Syndrome		
HUMROR2	ROR2	ROR2-Related Disorders		
A				
Z25920	CMD1D	Dilated Cardiomyopathy		
AA887962	HLXB9	Currarino Syndrome		
R00281	ALDH5A1	Succinic Semialdehyde Dehydrogenase Deficiency		
HSPCCAR	PCCA	Propionic Acidemia		
N43992	DLL3	Spondylocostal Dysostosis, Autosomal Recessive ;Syndactyly, Type IV		
Z39790	MUT	Methylmalonicaciduria		
HUMARGL	ARG1	Argininemia		
M78631	SLC3A1	Cystinuria		
T80665	SLC7A9	Cystinuria		
T27286	HGD	Alkaptonuria		
HUMBCKD H	BCKDHA	Maple Syrup Urine Disease		
HUMBCKD HA	BCKDHB	Maple Syrup Urine Disease		
HSTRANSP	DBT	Maple Syrup Urine Disease		
Z44722	HLCS	Holocarboxylase Synthetase Deficiency		
Z38396	BTD	Biotinidase Deficiency		
T48178	POMT1	Walker-Warburg Syndrome		
T28737	GJB2	DFNA 3 Nonsyndromic Hearing Loss and Deafness; DFNB 1 Nonsyndromic		
		Loss and Deafness; GJB2-Related DFNB 1 Nonsyndromic Hearing Loss and Deafness; Nonsyndromic Hearing Loss and Deafness, Autosomal Dominant; Nonsyndromic Hearing Loss and Deafness, Autosomal Recessive; Vohwinkel Syndrome		
T05861	СОСН	DFNA 9 (COCH) ;Nonsyndromic Hearing Loss and Deafness, Autosomal Dominant		
HSBRN4	POU3F4	DFN 3		
HSU21938	TTPA	Ataxia with Vitamin E Deficiency (AVED)		
T93783	KIAA1985	Charcot-Marie-Tooth Neuropathy Type 4		
BE735997	SANS	Usher Syndrome Type 1		
AA548783	HOXD13	Syndactyly, Type II		
R33750	HOXA13	Hand-Foot-Uterus Syndrome		
HUMPP	GLDC	GLDC-Related Glycine Encephalopathy; Glycine Encephalopathy		
F04230	AMT	AMT-Related Glycine Encephalopathy ;Glycine Encephalopathy		
T54795	DECR	2,4-Dienoyl-CoA Reductase Deficiency		
R07295	ACAT1	Ketothiolase Deficiency		
S70578	ACAT1	Ketothiolase Deficiency		
HUMMEVK	MVK	Hyper IgD Syndrome ;Mevalonicaciduria		
IN				
T11245	HMGCL	3-Hydroxy-3-Methylglutaryl-Coenzyme A Lyase Deficiency		
Z41427	GCDH	Glutaricacidemia Type 1		
HSSHOXA	SHOX	Langer Mesomelic Dwarfism ;Leri-Weill Dyschondrosteosis ;Short Stature		
HUMDOPA DC	DDC	Aromatic L-Amino Acid Decarboxylase Deficiency		
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HSCOL3A4	COL6A3	Limb-Girdle Muscular Dystrophies, Autosomal Dominant			
HSCOL1A4	COL6A1	Limb-Girdle Muscular Dystrophies, Autosomal Dominant			
HSCOL2C2	COL6A2	Limb-Girdle Muscular Dystrophies, Autosomal Dominant			
H16770	RECQL4	Rothmund-Thomson Syndrome			
H11473	SGSH	Mucopolysaccharidosis Type IIIA			
H67137	MCCC1	3-Methylcrotonyl-CoA Carboxylase Deficiency			
R88931	MCCC2	3-Methylcrotonyl-CoA Carboxylase Deficiency			
Z24865	TCAP	Dilated Cardiomyopathy; Limb-Girdle Muscular Dystrophies, Autosomal			
		Recessive			
M86030	DCX	DCX-Related Malformations			
HUMACTA SK	ACTA1	Nemaline Myopathy			
HSDGIGLY	DSG1	Keratosis Palmoplantaris Striata			
HSRETSA	SAG	Retinitis Pigmentosa, Autosomal Recessive			
HSAPHOL	ALPL	Hypophosphatasia			
N73784	XPA	Xeroderma Pigmentosum			
T28958	XPC	Xeroderma Pigmentosum			
N69543	POLH	Xeroderma Pigmentosum			
T54103	POLH	Xeroderma Pigmentosum			
H56484	CKN1	Cockayne Syndrome			
Z38185	ERCC6	Cockayne Syndrome			
F07041	PI12	Familial Encephalopathy with Neuroserpin Inclusion Bodies			
AA633404	KCNE2	LQT 6; Romano-Ward Syndrome			
AF302095	KCNE2	LQT 6; Romano-Ward Syndrome			
HSTITINC2	CMD1G	Dilated Cardiomyopathy			
N99115	NPHP1	Nephronophthisis 1 ;Senior-Loken Syndrome			
HUMELAN AA	ELA2	ELA2-Related Neutropenia			
S67325	PCCB	Propionic Acidemia			
HSGA7331	M1S1	Corneal Dystrophy, Gelatinous Drop-Like			
HSACE	ACE	Angiotensin I Converting Enzyme 1			
S49816	TSHR	Congenital Hypothyroidism ;Familial Non-Autoimmune Hyperthyroidism			
Z30221	VMGLOM	Multiple Glomus Tumors			
H88042	COL9A3	Multiple Epiphyseal Dysplasia, Dominant			
M78119	ADA	Adenosine Deaminase Deficiency			
T55785	GAMT	Guanidinoacetate Methyltransferase Deficiency			
HUMCST4B A	CSTB	Myoclonic Epilepsy of Unverricht and Lundborg			
S73196	AQP2	Nephrogenic Diabetes Insipidus ;Nephrogenic Diabetes Insipidus, Autosomal			
HSU76388	NR5A1	XY Sex Reversal with Adrenal Failure			
HSCPHC22	MTRNR1	MTRNR1-Related Hearing Loss and Deafness			
H21596	PPARG	Diabetes Mellitus with Acanthosis Nigricans and Hypertension			
D56550	FOXC1	Anophthalmia ;Rieger Syndrome			
M78868	AP3B1	Hermansky-Pudlak Syndrome			
T47068	NOTCH3	CADASIL			
HSHMF1C	TCF1	Maturity-Onset Diabetes of the Young Type III			
AA223508	TCF1	Maturity-Onset Diabetes of the Young Type III			
AF049893	IPF1	Maturity-Onset Diabetes of the Young Type IV			
HSU30329	IPF1	Maturity-Onset Diabetes of the Young Type IV			
HSVHNF1	TCF2	Maturity-Onset Diabetes of the Young Type V			
HUMLDLRF	LDLR	Familial Hypercholesterolemia			
		- warming and has an			

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HSAPOBR2	APOB	Familial Hypercholesterolemia Type B				
T78010	ABCB7	Sideroblastic Anemia and Ataxia				
AF076215	PROP1	PROP1-Related Combined Pituitary Hormone Deficiency				
S99468	ALAD	Acute Hepatic Porphyria				
T61818	ABCC2	Dubin-Johnson Syndrome				
HUMLCAT	LCAT	Lecithin Cholesterol Acyltransferase Deficiency				
Z38510	HADHSC	Short Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency, Liver				
AF041240	PPOX	Variegate Porphyria				
T77011	PPOX	Variegate Porphyria				
Z40014	ALDH10	Sjogren-Larsson Syndrome				
S79867	KRT16	Nonepidermolytic Palmoplantar Hyperkeratosis ;Pachyonychia Congenita				
HUMKER56 K	KRT6A	Pachyonychia Congenita				
HSKERELP	KRT17	Pachyonychia Congenita ;Steatocystoma Multiplex				
R11850	KRT6B	Pachyonychia Congenita				
S69510	KRT9	Epidermolytic Palmoplantar Keratoderma				
HSCYTK	KRT13	White Sponge Nevus of Cannon				
T92918	KRT4	White Sponge Nevus of Cannon				
S54769	SPG7	Hereditary Spastic Paraplegia, Recessive ;SPG 7				
T50707	FECH	Erythropoietic Protoporphyria				
HUMPOMM	PXMP3	Zellweger Syndrome Spectrum				
R05392	PEX6	Zellweger Syndrome Spectrum				
Z38759	PEX12	Zellweger Syndrome Spectrum				
R14480	PEX16	Zellweger Syndrome Spectrum				
R10031	PEX13	Zellweger Syndrome Spectrum				
R13532	PXF	Zellweger Syndrome Spectrum				
Z30136	AGPS	Rhizomelic Chondrodysplasia Punctata Type 3				
HSU07866	ACOX	Pseudoneonatal Adrenoleukodystrophy				
N63143	ALG6	Congenital Disorders of Glycosylation				
HSTNFR1A	TNFRSF1	Familial Hibernian Fever				
AA018811	RP1	Retinitis Pigmentosa, Autosomal Dominant				
HSG11	RP1	Retinitis Pigmentosa, Autosomal Dominant				
T07942	RP1	Retinitis Pigmentosa, Autosomal Dominant				
H28658	PRPF31	Retinitis Pigmentosa, Autosomal Dominant				
T07062	PRPF8	Retinitis Pigmentosa, Autosomal Dominant				
T05573	RP18	Retinitis Pigmentosa, Autosomal Dominant				
HUMNRLG P	NRL	Retinitis Pigmentosa, Autosomal Dominant				
T87786	CRB1	Retinitis Pigmentosa, Autosomal Recessive				
H92408	TULP1	Retinitis Pigmentosa, Autosomal Recessive				
S42457	CNGA1	Retinitis Pigmentosa, Autosomal Recessive				
H30568	PDE6A	Retinitis Pigmentosa, Autosomal Recessive				
M78192	RLBP1	Retinitis Pigmentosa, Autosomal Recessive ;Retinitis Pigmentosa, Autosomal Recessive, Bothnia Type				
T10761	SLC4A4	Proximal Renal Tubular Acidosis with Ocular Abnormalities				
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N64339	<b>GJB6</b>	DFNA 3 Nonsyndromic Hearing Loss and Deafness; DFNB 1 Nonsyndromic Hearing Loss and Deafness; GJB6-Related DFNB 1 Nonsyndromic Hearing			
		II agg and Doofness (CIDE Deleted DEMA 2 Non June in II come a I agg an			
		Loss and Deafness; GJB6-Related DFNA 3 Nonsyndromic Hearing Loss and			
		Deafness; Hidrotic Ectodermal Dysplasia 2; Nonsyndromic Hearing Loss an Deafness, Autosomal Dominant : Nonsyndromic Hearing Loss and			
		Deafness, Autosomal Recessive			
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T67968	MAT1A_	Isolated Persistent Hypermethioninemia			
HUMUMPS	UMPS	Oroticaciduria			
HSPNP	NP	Purine Nucleoside Phosphorylase Deficiency			
AB006682	AIRE	Autoimmune Polyendocrinopathy Syndrome Type 1			
BE871354	JUP	Naxos Disease			
T08214	JUP	Naxos Disease			
F00120	DES	Dilated Cardiomyopathy			
R28506	MOCS1	Molybdenum Cofactor Deficiency			
T70309	MOCS2	Molybdenum Cofactor Deficiency			
T08212	SNCA	Parkinson Disease			
R99091	ABCC6	Pseudoxanthoma Elasticum			
T69749	ABCC6	Pseudoxanthoma Elasticum			
AA207040	PRG4	Arthropathy Camptodactyly Syndrome			
T57014	PRG4	Arthropathy Camptodactyly Syndrome			
F07016	OPPG	Osteoporosis Pseudoglioma Syndrome			
H27782	SCO2	Fatal Infantile Cardioencephalopathy due to COX Deficiency			
	3002	a manage of the second of the			
S54705S1	PRKAR1A	Carney Complex			
Z25903	SCA10	Spinocerebellar Ataxia Type10			
AA592984	WISP3	Progressive Pseudorheumatoid Arthropathy of Childhood			
Z39666	MCOLN1	Mucolipidosis IV			
HSEMX2	EMX2	Familial Schizencephaly			
HUMSP18A	SFTPB	Pulmonary Surfactant Protein B Deficiency			
Z40188	ATP8B1	Benign Recurrent Intrahepatic Cholestasis ; Progressive Familial Intrahepatic			
		Cholestasis ;Progressive Familial Intrahepatic Cholestasis 1			
7716015	GT 570 571				
U46845	CYP27B1	Pseudovitamin D Deficiency Rickets			
Z21585	MAPT	Frontotemporal Dementia with Parkinsonism-17			
HSPPD	HPD	Tyrosinemia Type III			
HUMUGT1F A	UGT1A	Crigler-Najjar Syndrome			
R20880	SLC19A2	Thiamine-Responsive Megaloblastic Anemia Syndrome			
H42203	TFAP2B	Char Syndrome			
Z30126	RYR2	Catecholaminergic Ventricular Tachycardia, Autosomal Dominant			
TIGODAN	A COVE	vv			
HSSPYRAT	AGXT	Hyperoxaluria, Primary, Type 1			
T80758	SEDL	Spondyloepiphyseal Dysplasia Tarda, X-Linked			
T89449	SEDL	Spondyloepiphyseal Dysplasia Tarda, X-Linked			
AA373083	FOXC2	Lymphedema with Distichiasis			
HUMPROP2 AB	SCA12	Spinocerebellar Ataxia Type12			
Z30145	ACTC	Dilated Cardiomyonathy			
HS1900	GDNF	Dilated Cardiomyopathy Hirschsprung Disease			
M62223	NEFL				
IVAOLLES	NELL	Charcot-Marie-Tooth Neuropathy Type 1F/2E; Charcot-Marie-Tooth Neuropathy Type 2; Charcot-Marie-Tooth Neuropathy Type 2E/1F			
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HSNCAML1	L1CAM	Hereditary Spastic Paraplegia, X-Linked ;L1 Syndrome			
T11074	L1CAM	Hereditary Spastic Paraplegia, X-Linked; L1 Syndrome			
HUMHPRO	GCSH	Glycine Encephalopathy			
T					
HSTATR	TAT	Tyrosinemia Type II			
Z19514	CPT1B	Carnitine Palmitoyltransferase IB (muscle) Deficiency			
BE149388	CPT1B	Carnitine Palmitoyltransferase IB (muscle) Deficiency			
HSALK3A	BMPR1A	Juvenile Polyposis Syndrome			
T78581	CLN5	CLN5-Related Neuronal Ceroid-Lipofuscinosis; Neuronal Ceroid-			
		Lipofuscinoses			
N32269	CLN8	CLN8-Related Neuronal Ceroid-Lipofuscinosis ;Neuronal Ceroid-			
113220		Lipofuscinoses			
HSU44128	SLC12A3	Gitelman Syndrome			
AI590292	NPHS2	Focal Segmental Glomerulosclerosis; Steroid-Resistant Nephrotic Syndrome			
AISJUZJZ	1411152	1 com pogmentar diomortidosis spiciota-resistant repinote bynatome			
M62209	ACTN4	Focal Segmental Glomerulosclerosis			
H53423	CNGB3	Achromatopsia ;Achromatopsia 3			
HSEPAR	HCI	Hemangioma, Hereditary			
R14741	ZIC2	Holoprosencephaly 5			
H84264	SIX3	Anophthalmia ;Holoprosencephaly 2			
T10497	TGIF	Holoprosencephaly 4			
Z30052	USP9Y	Y Chromosome Infertility			
N85185	DBY	Y Chromosome Infertility			
T11164	SPTLC1	Hereditary Sensory Neuropathy Type I			
T68440	GNE	GNE-Related Myopathies; Sialuria, French Type			
HSPROPER	PFC	Properdin Deficiency, X-Linked			
D		,,			
T46865	SURF1	Leigh Syndrome (nuclear DNA mutation)			
AI015025	VAX1	Anophthalmia			
BM727523	VAX1	Anophthalmia			
AA310724	SIX6	Anophthalmia			
R37821	TP63	TP63-Related Disorders			
AF091582	ABCB11	Progressive Familial Intrahepatic Cholestasis			
HUMHOX7	MSX1	Hypodontia, Autosomal Dominant ;Tooth-and-Nail Syndrome			
R15034	CACNB4	Price di Atania Trus 2			
T52100	TYROBP	Episodic Ataxia Type 2 PLOSL			
F09012	MTMR2	Charcot-Marie-Tooth Neuropathy Type 4			
T08510	APTX	Ataxia with Oculomotor Apraxia; Ataxia with Oculomotor Apraxia 1			
100310	ALIA	Ataxia with Octionotor Apraxia; Ataxia with Octionotor Apraxia 1			
HUMHAAC	HF1	Hemolytic-Uremic Syndrome			
C16899	MTND5	Leber Hereditary Optic Neuropathy ;Mitochondrial DNA-Associated Leigh			
		Syndrome and NARP			

#AUTOANTIGEN\_IN\_AUTOIMMUNE\_DISEASE -Secreted splice variants of known autoantigens associated with a specific autoimmune syndrome, as for example, these listed in table 11, can be used to treat the syndrome. The proposed therapeutic mechanism is that the secreted splice variant would bind the auto-antibodies which formed against the autoantigen, therefore reduce their circulating levels, that would lead

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to less binding of the autoantigen by auto antibodies and as a consequence diminish the autoimmune clinical symptoms.

Examples of proteins which are involved in autoimmune diseases are presented in Table 11 together with the corresponding internal gene contig name, enabling to allocate the new splice variants within the data files in the attached CD-ROMs 1 and 3.

Table 11

Contig HUMROSSA Sjogren's syndrome Insulin dependent diabetes HUMI69KAA Mellitus Goodpasture's syndrome HSACHRA Myasthenia Gravis Z21711 Rheumatoid Arthritis Annexin A11 Z21711 Sjogren's syndrome Annexin A11 Z21711 SLE Annexin A11 S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun M77907 SLE  Description 52 kDa Ro protein 69 kDa islet cell autoantigen alpha 3 chain of collagen IV Alpha chain of nicotinic Acetyl Choline recepto Annexin A11 Annexin A11 Annexin A11 S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun ATP-dependent DNA helicase II, 80 kDa subun	r
Insulin dependent diabetes HUMI69KAA Mellitus Goodpasture's syndrome HSACHRA Myasthenia Gravis Alpha chain of nicotinic Acetyl Choline recepto Annexin A11 Z21711 Sigogren's syndrome Annexin A11 Z21711 SLE Annexin A11 S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	r
HUMI69KAA Mellitus 69 kDa islet cell autoantigen  S55790 Goodpasture's syndrome alpha 3 chain of collagen IV  HSACHRA Myasthenia Gravis Alpha chain of nicotinic Acetyl Choline recepto  Z21711 Rheumatoid Arthritis Annexin A11  Z21711 Sjogren's syndrome Annexin A11  Z21711 SLE Annexin A11  S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun  M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	r
S55790 Goodpasture's syndrome alpha 3 chain of collagen IV HSACHRA Myasthenia Gravis Alpha chain of nicotinic Acetyl Choline recepto Z21711 Rheumatoid Arthritis Annexin A11 Z21711 Sjogren's syndrome Annexin A11 Z21711 SLE Annexin A11 S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	r
HSACHRA Myasthenia Gravis Alpha chain of nicotinic Acetyl Choline recepto Z21711 Rheumatoid Arthritis Annexin A11 Z21711 Sjogren's syndrome Annexin A11 Z21711 SLE Annexin A11 S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	<u>r</u>
Z21711         Rheumatoid Arthritis         Annexin A11           Z21711         Sjogren's syndrome         Annexin A11           Z21711         SLE         Annexin A11           S38729         SLE         ATP-dependent DNA helicase II, 70 kDa subun           M77907         SLE         ATP-dependent DNA helicase II, 80 kDa subun	
Z21711         Sjogren's syndrome         Annexin A11           Z21711         SLE         Annexin A11           S38729         SLE         ATP-dependent DNA helicase II, 70 kDa subun           M77907         SLE         ATP-dependent DNA helicase II, 80 kDa subun	
Z21711 SLE Annexin A11 S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	
S38729 SLE ATP-dependent DNA helicase II, 70 kDa subun M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	
M77907 SLE ATP-dependent DNA helicase II, 80 kDa subun	it
T08224 scleroderma Autoantigen p27	10
T08224 Sjogren's syndrome Autoantigen p27	
M85815 Pemphigus bullous pemphigoid antigen 1	<del></del>
HUMROSSAA SLE calreticulin	
General autoimmune	· · · · · · · · · · · · · · · · · · ·
HUMCENPRO response Centromere autoantigen C	
General autoimmune	
HSU14518 response Centromere protein A	
M62116 dermatomyositis Chromodomain helicase-DNA-binding protein 3	
T05980 dermatomyositis Chromodomain helicase-DNA-binding protein 4	ļ
Autoimmune demyelinating	
H18687 disease claudin 11	
Dermatomyositis associated with cancer putative autoantigen-1	<b>3</b>
M79258 dermatomyositis autoantigen-1 HSDGIGLY Pemphigus foliaceus Desmoglein 1	
HUMPVA Pemphigus vulgaris Desmoglein 3	
Dihydrolipoamide acetyltransferase component of pyruvate dehydrogenase complex, mitochondria	ot
M77924 Primary billiary cirrhosis pyruvate dehydrogenase complex, mitochondria D11598 Polymyositis Exosome complex exonuclease RRP45	<u>.                                    </u>
D11598 scleroderma Exosome complex exonuclease RRP45	
HUMACTINBI Grave's disease Filamin B	
Z17837 Rheumatoid Arthritis follistatin-like 1	
Insulin dependent diabetes	
HUMGAD Mellitus glutamate decarboxylase 1 (GAD 1)	
Insulin dependent diabetes	
HSGLAD2A Mellitus glutamate decarboxylase 2 (GAD 2)	
D12383 dermatomyositis glycyl-tRNA synthetase	
D12383 Polymyositis glycyl-tRNA synthetase	
Z40013 Sjogren's syndrome Golgi autoantigen, golgin subfamily A member	
N28220 Rheumatoid Arthritis Golgi autoantigen, golgin subfamily B member 1	

	r=	1
N28220	Sjogren's syndrome	Golgi autoantigen, golgin subfamily B member 1
HUMMSCA	Grave's disease	Grave's disease carrier protein
HUMGRAVIN	Myasthenia Gravis	gravin
L		Homo sapiens small nuclear ribonucleoprotein
HUMRNPSMBA		polypeptides B and B1
TIT IN ATRICED	Insulin resistant diabetes	
HUMINSR	Mellitus	insulin receptor
HSRNAIFMH	Pernicious Anemia	intrinsic factor
D12018	dermatomyositis	isoleucine-tRNA synthetase
D12018	Polymyositis	isoleucine-tRNA synthetase
T97710	Pemphigus	ladinin 1
HSAUTAN64	Autoimmune thyroid disease	
HSLAANT	SLE	Lupus La protein
HUM60RO	SLE	Lupus Ro Protein
F02808	dermatomyositis	lysyl-tRNA synthetase
F02808	Polymyositis	lysyl-tRNA synthetase
E01282	General autoimmune	
F01282	response	Major centromere autoantigen B
M78010	multiple sclerosis	myelin basic protein
R89508	Autoimmune demyelinating disease	Muslim align danden auto alusa metain (MOC)
HUMHSTNBP		Myelin oligodendrocyte glycoprotein (MOG)
	Autoimmune infertility	Nuclear autoantigenic sperm protein
S80305	Antiphospholipid syndrome	Phospholipid beta 2 glycoprotein 1 complex
D11598	Polymyositis	polymyositis/scleroderma autoantigen 1
D11598	scleroderma	polymyositis/scleroderma autoantigen 1
HUMAUA	Polymyositis	Polymyositis/scleroderma autoantigen 2
HUMAUA	scleroderma	Polymyositis/scleroderma autoantigen 2
HUMMCH	Vitiligo	Pro-melanin-concentrating hormone
T05361	Insulin dependent diabetes Mellitus	
103301	ivienitus	protein tyrosine phosphatase Proteinase 3 (ANCA - antineutrophil cytoplasmic
HSP3MY	Wegener's granulomatosis	antibody)
	Insulin dependent diabetes	and to the state of the state o
F02560	Mellitus	Protein-tyrosine phosphatase-like N [Precursor]
	Insulin dependent diabetes	
T05361	Mellitus	Receptor-type protein-tyrosine phosphatase N2
HUM60RO	Sjogren's syndrome	Sjogren syndrome antigen A2
H81770	Sjogren's syndrome	Sjogren's syndrome nuclear autoantigen 1
HUMSNRNPD	SLE	Small nuclear ribonucleoprotein Sm D1
HUMMSCA	Grave's disease	solute carrier family 25
	Insulin dependent diabetes	
Z17347	Mellitus	SOX-13 protein
N79953	Autoimmune infertility	Sperm surface protein Sp17
T08224	scleroderma	SSSCA1
T08224	Sjogren's syndrome	SSSCA1
R54783	interstitial cystitis	synaptonemal complex protein SC65 (SC65)
S40807	Hashimoto's thyroditis	thyroglobulin
S38729	Autoimmune thyroid disease	thyroid autoantigen 70kDa
HUMTPOA	Hashimoto's thyroditis	Thyroid peroxidase
HUMBF7A	Celiac disease	transglutaminase 2
S49816	Grave's disease	TSH receptor

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# Differentially expressed biomolecular sequences - field description

#TS - This field denotes tissue-specific genes which gene products are upregulated in at least one tissue. Such gene products might be used as tissue or pathological markers. Therapeutic uses of such gene products vary and may include, for example, anti-cancer vaccination and drug-targeting. Other exemplary uses are described hereinabove. It will be appreciated that avary differentially expressed gene product can be assigned to higher hierarchies of classification. Thus, for example, a prostate cancer specific gene product may be used as a diagnostic marker for this cancer, but may be also used as epithelial cancer marker and as a general cancer marker. See for example, Table 12, below.

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Table 12

Tissue-tumor searched	Cancer sub-type	Cancer type	Cancer - general
All tumor types			All tumor types
prostate-tumor	prostate-tumor	All epithelial tumors	All tumor types
lung-tumor	lung-tumor	All epithelial tumors	All tumor types
head and neck-tumor	head and neck-tumor	All epithelial tumors	All tumor types
stomach-tumor	stomach-tumor	All epithelial tumors	All tumor types
colon-tumor	colon-tumor	All epithelial tumors	All tumor types
mammary-tumor	mammary-tumor	All epithelial tumors	All tumor types
kidney-tumor	kidney-tumor	All epithelial tumors	All tumor types
ovary-tumor	ovary-tumor	All epithelial tumors	All tumor types
uterus/cervix-tumor	uterus/cervix-tumor	All epithelial tumors	All tumor types
thyroid-tumor	thyroid-tumor	All epithelial tumors	All tumor types
adrenal-tumor	adrenal-tumor	All epithelial tumors	All tumor types
pancreas-tumor	pancreas-tumor	All epithelial tumors	All tumor types
liver-tumor	liver-tumor	All epithelial tumors	All tumor types
skin-tumor	skin-tumor	All epithelial tumors	All tumor types
brain-tumor	brain-tumor		All tumor types
eye-tumor	eye-tumor		All tumor types
bone-tumor	bone-tumor	Sarcoma	All tumor types
bone marrow-tumor	bone marrow-tumor	Blood cancer	All tumor types
blood-cancer	blood-cancer	Blood cacner	All tumor types
T-cells-tumor	T-cells-tumor	Blood cancer	All tumor types
lymph nodes-tumor	lymph nodes-tumor	Blood cancer	All tumor types
muscle-tumor	muscle-tumor	Sarcoma	All tumor types
testis-tumor	testis-tumor		All tumor types

The annotation format of differentially expressed gene products is as follows.

#TS tissue-name – where the "tissue name" field specifies the list of tissues for which tissue-specific genes/variants were searched, as follows: amniotic+placenta; Blood; Bone; Bone marrow; Brain; Cervix+uterus; Colon; Endocrine, adrenal gland; Endocrine, pancreas; Endocrine, parathyroid+thyroid; Gastrointestinal tract;

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Genitourinary; Head and neck; Immune, T-cells; Kidney; Liver; Lung; Lymph node; Mammary gland; Muscle; Ovary; Prostate; Skin; Thymus.

#TAA – This field denotes genes or transcript sequences over-expressed in cancer. The annotation format is as follows.

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#TAA tissue-name - - where the "tissue name" field specifies the list of tissues for which tissue-tumor specific genes/variants were searched, as follows: All tumor types; All epithelial tumors; prostate-tumor; lung-tumor; head and neck-tumor; stomach-tumor; colon-tumor; mammary-tumor; kidney-tumor; ovary-tumor; uterus/cervix-tumor; thyroid-tumor; adrenal-tumor; pancreas-tumor; liver-tumor; skin-tumor; brain-tumor; bone-tumor; bone marrow-tumor; blood-cancer; T-cells-tumor; lymph nodes-tumor; muscle-tumor.

#### **EXAMPLE 11**

## Modulating Nicastrin activity using COPA inhibitors

The present inventors uncovered that coatomer protein complex, subunit  $\alpha$  (COPA, GenBank Accession No. NM\_004371) and Nicastrin (NCSTN, GenBank Accession No. NM\_015331) are a 5'-5' antisense pair. Sequence alignment is illustrated in Figure 24a. Expression patterns of NCSTN and COPA show positive correlation (see Figure 24b).

Nicastrin is a crucial member in the membrane-associated  $\gamma$ -secretase complex which is responsible for the specific proteolysis of beta-Amyloid that cause Alzheimer Disease (AD). It is well-established that the stability of the  $\gamma$ -secretase complex is essential for its function (Takasugi et al. Nature. 2003 Mar 27;422(6930):438-41. Epub 2003 Mar 16.) . Coatomer proteins are responsible for the stability and transport of complexes to the membrane. This observation makes AD a disease of complex stability rather than a disease of proteolysis. Databases such as LocusLINK show a linkage between nicastrin and Alzheimer's disease, but not between COPA and Alzheimer's disease. Therefore, this finding represents a new linkage and also a potential new therapeutic modality.

Since COPA protein (long form see Figure 24b) clearly stabilizes NCSTN, it is suggested that downregulation of COPA even in combination with other treatment

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methods against the gamma-secretase members, will be very efficient in combating AD.

#### **EXAMPLE 12**

### Enhancing a therapeutic efficacy of IL-24 using a TOSO inhibitor

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The present inventors uncovered that TOSO (GenBank Accession No. NM\_005449) is a naturally occurring antisense transcript of IL-24 (GenBank Accession No. NM\_006850); overlap alignement between TOSO and IL-24 is provided in Figure 25a. Products of TOSO and IL-24 regulate apoptosis in an opposite manner, as implied from their inverse expression patterns (see Figure 25b). Essentially, while IL-24 induces selective apoptosis in various cancer cells, TOSO is a potent inhibitor of FAS-induced apoptotic signaling through its extracellular domain (see for example information at LocusLINK, which may be obtained by entering the above names to the database).

Since TOSO and IL-24 exhibit opposing functions at the protein level, it is logical that expression levels thereof follow an inverse relationship. To ensure such inverse expression patterns, TOSO mRNA functions as a negative regulator (antisense) of IL-24 by preventing or reducing IL-24 mRNA translation.

Due to this sense/antisense agonist/antagonist relationship between TOSO and IL-24 it is highly likely that therapeutic efficacy of IL-24 can be enhanced by inhibiting the expression of TOSO, by using, for example, a small molecule inhibitor to inhibit TOSO expression or expression or activity of endogenous TOSO regulators.

Although the invention has been described in conjunction with specific embodiments thereof, it is evident that many alternatives, modifications and variations will be apparent to those skilled in the art. Accordingly, it is intended to embrace all such alternatives, modifications and variations that fall within the spirit and broad scope of the appended claims. All publications, patents, patent applications and sequences identified by their accession numbers mentioned in this specification are herein incorporated in their entirety by reference into the specification, to the same extent as if each individual publication, patent, patent application or sequence identified by their accession number was specifically and individually indicated to be incorporated herein by reference. In addition, citation or identification of any

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reference in this application shall not be construed as an admission that such reference is available as prior art to the present invention.

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## CD-ROM Content

The following CD-ROMs are attached herewith:

Information provided as: File name/byte size/date of creation /operating system/machine format

### CD-ROM1:

- 1. AS\_patent\_data\_description.doc/ 2 KB/ July 31, 2003/ Microsoft Windows Internet Explorer/ PC.
- 2. seqs\_125/ 335,513 Kb/ November 15, 2001/ Microsoft Windows Internet Explorer/ PC.
- 3. seqs\_133/ 253,406 Kb / April 8, 2003/ Microsoft Windows Internet Explorer/ PC.

#### CD-ROM2:

- 1. alignments\_125/ 391,693 Kb/ November 15, 2001/ Microsoft Windows Internet Explorer/ PC.
- 2. table\_125/ 13,926 Kb/ November 15, 2001/ Microsoft Windows Internet Explorer/ PC.
- 3. Table\_S1.txt/ 41 Kb bytes/ July 31, 2003/ Microsoft Windows / PC.
- 4. Table\_S2.txt/ 135 Kb/ July 31,, 2003/ Microsoft Windows / PC.

### CD-ROM3:

- 1. alignments\_133/ 454,180 Kb/ April 8, 2003/ Microsoft Windows Internet Explorer/ PC.
- 2. table\_133/ 10,741 Kb/ April 8, 2003/ Microsoft Windows Internet Explorer/ PC.
- 3. annotations\_133 / 5,065 Kb/ May 17, 2004/ Microsoft Windows Internet Explorer/ PC.
- 4. pep\_seqs\_133/6,470 Kb/ May 17, 2004/ Microsoft Windows Internet Explorer/ PC.
- 5. Trans2Pep/565 Kb/ May 17, 2004/ Microsoft Windows Internet Explorer/ PC.

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PCT/IL2004/000429

#### WHAT IS CLAIMED IS:

WO 2004/104161

- 1. A method of identifying putative naturally occurring antisense transcripts, the method comprising:
  - (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; and
  - (b) identifying expressed polynucleotide sequences from said second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of said first database according to at least one sequence criterion, thereby identifying putative naturally occurring antisense transcripts, wherein said at least one sequence criterion includes one or more of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.
- 2. The method of claim 1, wherein said first database includes sequences of a type selected from the group consisting of genomic sequences, expressed sequence tags, contigs, intron sequences, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 3. The method of claim 1, wherein said second database includes sequences of a type selected from the group consisting of expressed sequence tags, contigs, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 4. The method of claim 1, wherein an average sequence length of said expressed polynucleotide sequences of said second database is selected from a range of 0.02 to 0.8 Kb.
  - 5. The method of claim 1, wherein said second database is generated by:
  - (i) providing a library of expressed polynucleotides;
  - (ii) obtaining sequence information of said expressed polynucleotides;

- (iii) computationally selecting at least a portion of said expressed polynucleotides according to at least one sequence criterion; and
- (iv) storing said sequence information of said at least a portion of said expressed polynucleotides thereby generating said second database.
- 6. The method of claim 1 further comprising the step of testing the putative naturally occurring antisense transcripts for an ability to form said duplex with said at least one sense oriented polynucleotide sequence under physiological conditions,
- 7. The method of claim 1 further comprising the step of computationally testing the putative naturally occurring antisense transcripts according to at least one criterion selected from the group consisting of sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.
- 8. A kit for quantifying at least one mRNA transcript of interest, the kit comprising at least one oligonucleotide being designed and configured so as to be complementary to a sequence region of the mRNA transcript of interest, said sequence region not being complementary with a naturally occurring antisense transcript.
- 9. The kit of claim 8, wherein a length of said at least one oligonucleotide is selected from a range of 15-200 nucleotides.
- 10. The kit of claim 8, wherein said at least one oligonucleotide is a single stranded oligonucleotide.
- 11. The kit of claim 8, wherein said at least one oligonucleotide is a double stranded oligonucleotide.

- 12. The kit of claim 8, wherein a guanidine and cytosine content of said at least one oligonucleotide is at least 25 %.
  - 13. The kit of claim 8, wherein said at least one oligonucleotide is labeled.
- 14. The kit of claim 8, wherein said at least one oligonucleotide is attached to a solid substrate.
- 15. The kit of claim 14, wherein said solid substrate is configured as a microarray and whereas said at least one oligonucleotide includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 16. A kit for quantifying at least one mRNA transcript of interest, the kit comprising at least one pair of oligonucleotides including a first oligonucleotide capable of binding the at least one mRNA transcript of interest and a second oligonucleotide being capable of binding a naturally occurring antisense transcript complementary to the mRNA of interest.
- 17. The kit of claim 16, wherein a length of each of said first and second oligonucleotides is selected from a range of 15-200 nucleotides
- 18. The kit of claim 16, wherein said first and second oligonucleotides are single stranded oligonucleotides.
- 19. The kit of claim 16, wherein said first and second oligonucleotides are double stranded oligonucleotide.
- 20. The kit of claim 16, wherein a guanidine and cytosine content of each of said first and second oligonucleotides is at least 25 %.
- 21. The kit of claim 16, wherein said first and second oligonucleotides are labeled.

- 22. The kit of claim 16, wherein said first and second oligonucleotides are attached to a solid substrate.
- 23. The kit of claim 22, wherein said solid substrate is configured as a microarray and whereas each of said first and second oligonucleotides includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 24. A kit for quantifying at least one naturally occurring antisense transcript of interest, the kit comprising at least one oligonucleotide being designed and configured so as to be complementary to a sequence region of the at least one naturally occurring antisense transcript of interest, said sequence region not being complementary with a naturally occurring mRNA transcript.
- 25. The kit of claim 24, wherein a length of said at least one oligonucleotide is selected from a range of 15-200 nucleotides.
- 26. The kit of claim 24, wherein said at least one oligonucleotide is a single stranded oligonucleotide.
- 27. The kit of claim 24, wherein said at least one oligonucleotide is a double stranded oligonucleotide.
- 28. The kit of claim 24, wherein a guanidine and cytosine content of said at least one oligonucleotide is at least 25 %.
- 29. The kit of claim 24, wherein said at least one oligonucleotide is labeled.
- 30. The kit of claim 24, wherein said at least one oligonucleotide is attached to a solid substrate.

- 31. The kit of claim 30, wherein said solid substrate is configured as a microarray and whereas said at least one oligonucleotide includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 32. A method of designing artificial antisense transcripts, the method comprising:
  - (a) providing a database of naturally occurring antisense transcripts;
  - (b) extracting from said database criteria governing structure and/or function of said naturally occurring antisense transcripts, wherein said criteria governing structure and/or function of said naturally occurring antisense transcripts include one or more of antisense length, complementarity length, complementarity position, intron molecules, alternative splicing sites, tissue specificity, pathological abundance, chromosomal mapping, open reading frames, promoters, hairpin structures, helix structures, stem and loops, pseudoknots and tertiary interactions, guanidine and/or cytosine content, guanidine tandems, adenosine content, thermodynamic criteria, RNA duplex melting point, RNA modifications, protein-binding motifs, palindromic sequence and predicted single stranded and double stranded regions.; and
  - (c) designing the artificial antisense transcripts according to said criteria.
- 33. The method of claim 32, wherein said step of providing said database of naturally occurring antisense transcripts is effected by:
  - (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; and
  - (b) identifying expressed polynucleotide sequences from said second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of said first database,

- (c) storing a sequence of said expressed polynucleotide sequences identified in step (b), thereby providing said database of said naturally occurring antisense transcripts..
- 34. The method of claim 33, wherein said first database includes sequences of a type selected from the group consisting of genomic sequences, expressed sequence tags, contigs, intron sequences, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 35. The method of claim 33, wherein said second database includes sequences of a type selected from the group consisting of expressed sequence tags, contigs, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 36. The method of claim 33, wherein an average sequence length of said expressed polynucleotide sequences of said second database is selected from a range of 0.02 to 0.8 Kb.
  - 37. The method of claim 33, wherein said second database is generated by:
  - (i) providing a library of expressed polynucleotides;
  - (ii) obtaining sequence information of said expressed polynucleotides;
  - (iii) computationally selecting at least a portion of said expressed polynucleotides according to at least one sequence criterion; and
  - (iv) storing said sequence information of said at least a portion of said expressed polynucleotides thereby generating said second database.
- 38. The method of claim 37, wherein said at least one sequence criterion for computationally selecting said at least a portion of said expressed polynucleotide is selected from the group consisting of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

- 39. The method of claim 33, further comprising the step of testing said putative naturally occurring antisense transcripts for an ability to form said duplex with said at least one sense oriented polynucleotide sequence under physiological conditions.
- 40. The method of claim 33 further comprising the step of computationally testing said putative naturally occurring antisense transcripts according to at least one criterion selected from the group consisting of sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.
- 41. A computer readable storage medium comprising a database including a plurality of sequences, wherein each sequence is of a naturally occurring antisense transcript.
- 42. The computer readable storage medium of claim 41, wherein said database further includes information pertaining to each sequence of said naturally occurring antisense transcripts, said information is selected from the group consisting of related sense gene, antisense length, complementarity length, complementarity position, intron molecules, alternative splicing sites, tissue specificity, pathological abundance, chromosomal mapping, open reading frames, promoters, hairpin structures, helix structures, stem and loops, pseudoknots and tertiary interactions, guanidine and/or cytosine content, guanidine tandems, adenosine content, thermodynamic criteria, RNA duplex melting point, RNA modifications, protein-binding motifs, palindromic sequence and predicted single stranded and double stranded regions.
- 43. The computer readable storage medium of claim 41, wherein said database further includes information pertaining to generation of said database and potential uses of said database.

- 44. A method of generating a database of naturally occurring antisense transcripts, the method comprising:
  - (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences;
  - (b) identifying expressed polynucleotide sequences from said second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of said first database so as to identify putative naturally occurring antisense transcripts; and
  - (c) storing sequence information of said identified naturally occurring antisense transcripts, thereby generating the database of the naturally occurring antisense transcripts.
- 45. The method of claim 44, wherein said first database includes sequences of a type selected from the group consisting of genomic sequences, expressed sequence tags, contigs, intron sequences, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 46. The method of claim 44, wherein said second database includes sequences of a type selected from the group consisting of expressed sequence tags, contigs, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 47. The method of claim 44, wherein an average sequence length of said expressed polynucleotide sequences of said second database is selected from a range of 0.02 to 0.8 Kb.
  - 48. The method of claim 44, wherein said second database is generated by:
  - (i) providing a library of expressed polynucleotides;
  - (ii) obtaining sequence information of said expressed polynucleotides:
  - (iii) computationally selecting at least a portion of said expressed polynucleotides according to at least one sequence criterion; and

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(iv) storing said sequence information of said at least a portion of said expressed polynucleotides thereby generating said second database.

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- 49. The method of claim 48, wherein said at least one sequence criterion for computationally selecting said at least a portion of said expressed polynucleotide is selected from the group consisting of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.
- 50. The method of claim 44 further comprising the step of testing the putative naturally occurring antisense transcripts for an ability to form said duplex with said at least one sense oriented polynucleotide sequence under physiological conditions.
- 51. The method of claim 44 further comprising the step of computationally testing the putative naturally occurring antisense transcripts according to at least one criterion selected from the group consisting of sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.
- 52. A system for generating a database of a plurality of putative naturally occurring antisense transcripts, the system comprising a processing unit, said processing unit executing a software application configured for:
  - (a) computationally aligning a first database including sense-oriented polynucleotide sequences with a second database including expressed polynucleotide sequences; and
  - (b) identifying expressed polynucleotide sequences from said second database being capable of forming a duplex with at least one sense-oriented polynucleotide sequence of said first database according to at least one sequence criterion, wherein said at least one sequence criterion includes at least one of sequence length, sequence

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annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

- 53. The system of claim 52, wherein said first database includes sequences of a type selected from the group consisting of genomic sequences, expressed sequence tags, contigs, intron sequences, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 54. The system of claim 52, wherein said second database includes sequences of a type selected from the group consisting of expressed sequence tags, contigs, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 55. The system of claim 52, wherein an average sequence length of said expressed polynucleotide sequences of said second database is selected from a range of 0.02 to 0.8 Kb.
  - 56. The system of claim 52, wherein said second database is generated by:
  - (i) providing a library of expressed polynucleotides;
  - (ii) obtaining sequence information of said expressed polynucleotides;
  - (iii) computationally selecting at least a portion of said expressed polynucleotides according to at least one sequence criterion; and
  - (iv) storing said sequence information of said at least a portion of said expressed polynucleotides thereby generating said second database.
- 57. The system of claim 56, wherein said at least one sequence criterion for computationally selecting said at least a portion of said expressed polynucleotide is selected from the group consisting of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

- 58. The system of claim 52 further comprising the step of testing the putative naturally occurring antisense transcripts for an ability to form said duplex with said at least one sense oriented polynucleotide sequence under physiological conditions.
- 59. The system of claim 52 further comprising the step of computationally testing the putative naturally occurring antisense transcripts according to at least one criterion selected from the group consisting of sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.
- 60. A method of identifying putative naturally occurring antisense transcripts, the method comprising screening a database of expressed polynucleotides sequences according to at least one sequence criterion, said at least one sequence criterion being selected to identify putative naturally occurring antisense transcripts.
- 61. The method of claim 60, wherein said database includes sequences of a type selected from the group consisting of expressed sequence tags, contigs, complementary DNA (cDNA) sequences, pre-messenger RNA (mRNA) sequences and mRNA sequences.
- 62. The method of claim 61, wherein an average sequence length of said expressed polynucleotide sequences of said second database is selected from a range of 0.02 to 0.8 Kb.
- 63. The method of claim 61, wherein said at least one sequence criterion is selected from the group consisting of sequence length, sequence annotation, sequence information, intron splice consensus site, intron sharing, sequence overlap, rare restriction site, poly(T) head, poly(A) tail, and poly(A) signal.

- 64. The method of claim 61 further comprising the step of testing the putative naturally occurring antisense transcripts for an ability to form a duplex with at least one sense oriented polynucleotide sequence under physiological conditions.
- 65. A method of quantifying at least one mRNA of interest in a biological sample, the method comprising:
  - (a) contacting the biological sample with at least one oligonucleotide capable of binding with the at least one mRNA of interest, wherein said at least one oligonucleotide is designed and configured so as to be complementary to a sequence region of the mRNA transcript of interest, said sequence region not being complementary with a naturally occurring antisense transcript; and
  - (b) detecting a level of binding between the at least one mRNA of interest and said at least one oligonucleotide to thereby quantify the at least one mRNA of interest in the biological sample.
- 66. The method of claim 65, wherein said at least one oligonucleotide is attached to a solid substrate.
- 67. The method of claim 66, wherein said solid substrate is configured as a microarray and whereas said at least one oligonucleotide includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 68. The method of claim 65, wherein said at least one oligonucleotide is labeled and whereas step (b) is effected by quantifying said label.
- 69. The method of claim 65, wherein a length of said at least one oligonucleotide is selected from a range of 15-200 nucleotides.
- 70. The method of claim 65, wherein said at least one oligonucleotide is a single stranded oligonucleotide.

- 71. The method of claim 65, wherein said at least one oligonucleotide is a double stranded oligonucleotide.
- 72. The method of claim 65, wherein a guanidine and cytosine content of said at least one oligonucleotide is at least 25 %.
- 73. A method of quantifying the expression potential of at least one mRNA of interest in a biological sample, the method comprising:
  - (a) contacting the biological sample with at least one pair of oligonucleotides including a first oligonucleotide capable of binding the at least one mRNA of interest and a second oligonucleotide being capable of binding a naturally occurring antisense transcript complementary to the mRNA of interest; and
  - (b) detecting a level of binding between the at least one mRNA of interest and said first oligonucleotide and a level of binding between said naturally occurring antisense transcript complementary to the mRNA of interest and said second oligonucleotide to thereby quantify the expression potential of the at least one mRNA of interest in the biological sample.
- 74. The method of claim 73, wherein a length of each of said first and second oligonucleotides is selected from a range of 15-200 nucleotides
- 75. The method of claim 73, wherein said first and second oligonucleotides are single stranded oligonucleotides.
- 76. The method of claim 73, wherein said first and second oligonucleotides are double stranded oligonucleotide.
- 77. The method of claim 73, wherein a guanidine and cytosine content of each of said first and second oligonucleotides is at least 25 %.

- 78. The method of claim 73, wherein said first and second oligonucleotides are labeled and whereas step (b) is effected by quantifying said label.
- 79. The method of claim 73, wherein said first and second oligonucleotides are attached to a solid substrate.
- 80. The method of claim 79, wherein said solid substrate is configured as a microarray and whereas each of said first and second oligonucleotides includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 81. A method of quantifying at least one naturally occurring antisense transcript of interest in a biological sample, the method comprising:
  - (a) contacting the biological sample with at least one oligonucleotide capable of binding with the at least one naturally occurring antisense transcript of interest, wherein said at least one oligonucleotide is designed and configured so as to be complementary to a sequence region of the naturally occurring antisense transcript of interest, said sequence region not being complementary with a naturally occurring mRNA transcript; and
  - (b) detecting a level of binding between the at least one naturally occurring antisense transcript of interest and said at least one oligonucleotide to thereby quantify the at least one naturally occurring antisense transcript of interest in the biological sample.
- 82. The method of claim 81, wherein said at least one oligonucleotide is attached to a solid substrate.
- 83. The method of claim 82, wherein said solid substrate is configured as a microarray and whereas said at least one oligonucleotide includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.

- 84. The method of claim 81, wherein said at least one oligonucleotide is labeled and whereas step (b) is effected by quantifying said label.
- 85. The method of claim 81, wherein a length of said at least one oligonucleotide is selected from a range of 15-200 nucleotides.
- 86. The method of claim 81, wherein said at least one oligonucleotide is a single stranded oligonucleotide.
- 87. The method of claim 81, wherein said at least one oligonucleotide is a double stranded oligonucleotide.
- 88. The method of claim 81, wherein a guanidine and cytosine content of said at least one oligonucleotide is at least 25 %.
  - 89. A method of identifying a novel drug target, the method comprising:
  - (a) determining expression level of at least one naturally occurring antisense transcript of interest in cells characterized by an abnormal phenotype; and
  - (b) comparing said expression level of said at least one naturally occurring antisense transcript of interest in said cells characterized by an abnormal phenotype to an expression level of said at least one naturally occurring antisense transcript of interest in cells characterized by a normal phenotype, to thereby identify the novel drug target.
- 90. The method of claim 89, wherein said abnormal phenotype of said cells is selected from the group consisting of biochemical phenotype, morphological phenotype and nutritional phenotype.
- 91. The method of claim 89, wherein said determining expression level of at least one naturally occurring antisense transcript of interest is effected by at least one oligonucleotide designed and configured so as to be complementary to a sequence

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region of said at least one naturally occurring antisense transcript of interest, said sequence region not being complementary with a naturally occurring mRNA transcript.

- 92. The method of claim 91, wherein a length of said at least one oligonucleotide is selected from a range of 15-200 nucleotides.
- 93. The method of claim 91, wherein said at least one oligonucleotide is a single stranded oligonucleotide.
- 94. The method of claim 91, wherein said at least one oligonucleotide is a double stranded oligonucleotide.
- 95. The method of claim 91, wherein a guanidine and cytosine content of said at least one oligonucleotide is at least 25 %.
- 96. The method of claim 91, wherein said at least one oligonucleotide is labeled and whereas step (b) is effected by quantifying said label.
- 97. The method of claim 91, wherein said at least one oligonucleotide is attached to a solid substrate.
- 98. The method of claim 97, wherein said solid substrate is configured as a microarray and whereas said at least one oligonucleotide includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 99. A method of treating or preventing a disease, condition or syndrome associated with an upregulation of a naturally occurring antisense transcript complementary to a naturally occurring mRNA transcript, the method comprising administering a therapeutically effective amount of an agent for regulating expression of the naturally occurring antisense transcript.

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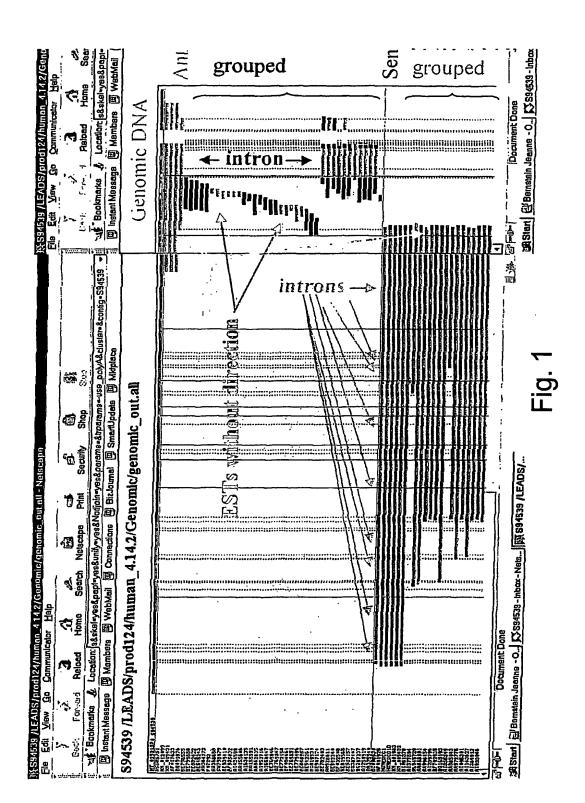
100. The method of claim 99, wherein said agent for regulating expression of the naturally occurring antisense transcript is at least one oligonucleotide designed and configured so as to hybridize to a sequence region of said at least one naturally occurring antisense transcript.

- 101. The method of claim 100, wherein said at least one oligonucleotide is a ribozyme.
- 102. The method of claim 100, wherein said at least one oligonucleotide is a sense transcript.
- 103. A method of diagnosing a disease, condition or syndrome associated with a substandard expression ratio of an mRNA of interest over a naturally occurring antisense transcript complementary to the mRNA of interest, the method comprising:
  - (a) quantifying expression level of the mRNA of interest and the naturally occurring antisense transcript complementary to the mRNA of interest;
  - calculating the expression ratio of the mRNA of interest over the (b) naturally occurring antisense transcript complementary to the mRNA of interest, thereby diagnosing the disease, condition or syndrome.
- 104. The method of claim 103, wherein quantifying said expression level of the mRNA of interest and the naturally occurring antisense transcript complementary to the mRNA of interest is effected by at least one pair of oligonucleotides including a first oligonucleotide capable of binding the mRNA of interest and a second oligonucleotide being capable of binding the naturally occurring antisense transcript complementary to the mRNA of interest.
- 105. The method of claim 104, wherein a length of each of said first and second oligonucleotides is selected from a range of 15-200 nucleotides
- 106. The method of claim 104, wherein said first and second oligonucleotides are single stranded oligonucleotides.

- 107. The method of claim 104, wherein said first and second oligonucleotides are double stranded oligonucleotides.
- 108. The method of claim 104, wherein a guanidine and cytosine content of each of said first and second oligonucleotides is at least 25 %.
- 109. The method of claim 104, wherein said first and second oligonucleotides are labeled.
- 110. The method of claim 104, wherein said first and second oligonucleotides are attached to a solid substrate.
- 111. The method of claim 110, wherein said solid substrate is configured as a microarray and whereas each of said first and second oligonucleotides includes a plurality of oligonucleotides each attached to said microarray in a regio-specific manner.
- 112. A computer readable storage medium comprising data stored in a retrievable manner, said data including sequence information of co-regulated human polynucleotide sequences as set forth in files seqs\_125 and/or seqs\_133 of enclosed CD-1, polypeptide sequences encoded by said polynucleotide sequences as set forth in the file pep\_seqs\_133 of enclosed CD-ROM-3 and sequence annotations as set forth in the file annotations\_133 of enclosed CD-ROM-3.
- 113. A method of modulating an activity or expression of a gene product, the method comprising upregulating or down regulating expression or activity of a naturally occurring antisense transcript of the gene product, thereby modulating the activity or expression of the gene product.

- 114. The method of claim 113, wherein said naturally accurring antisense transcript of the gene product is any of the nucleic acid sequences set forth in the file seqs\_125 or seqs\_133 of the enclosed CD-ROM1.
- 115. The method of claim 113, further comprising upregulating or down regulating expression or activity of the gene product.
- 116. An isolated polynucleotide comprising any of the nucleic acid sequences set forth in the file seqs\_125 or seqs\_133 of the enclosed CD-ROM1.
- 117. An isolated polypeptide comprising any of the amino acid sequences set forth in the file pep seqs 133 of enclosed CD-ROM 3.
- 118. A method of enhancing a therapeutic efficacy of a therapeutic agent, the method comprising providing to a subject in need thereof a naturally occurring antisense transcript of a gene encoding an expression product targeted by the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent, thereby enhancing the therapeutic efficacy of the therapeutic agent.
- 119. A method of enhancing a therapeutic efficacy of a therapeutic agent, the method comprising providing to a subject in need thereof a naturally occurring antisense transcript of a gene encoding an expression product capable of inhibiting therapeutic activity of the therapeutic agent, prior to, concomitant with, or following provision of the therapeutic agent thereby enhancing the therapeutic efficacy of the therapeutic agent.
- 120. A method of enhancing a therapeutic efficacy of a therapeutic agent, the method comprising providing to a subject in need thereof a polynucleotide complementary to a naturally occurring antisense transcript of a gene encoding an expression product capable of upregulating activity or expression of the therapeutic agent prior to, concomitant with, or following provision of the therapeutic agent, thereby enhancing the therapeutic efficacy of the therapeutic agent.

- 121. An isolated polynucleotide, comprising a polynucleotide selected according to any of claims 118-120.
- 122. The isolated polynucleotide of claim 121, comprising any of the nucleic acid sequences set forth in the file seqs\_125 or seqs\_133 of the enclosed CD-ROM1, selected according to any of claims 118-120.



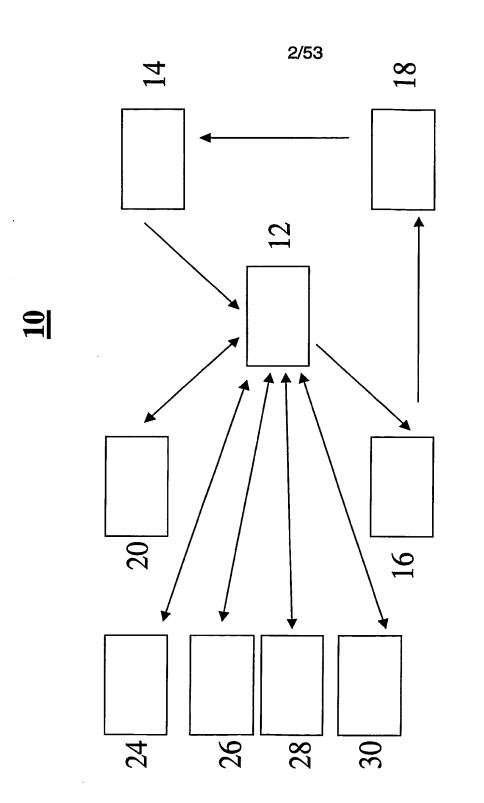
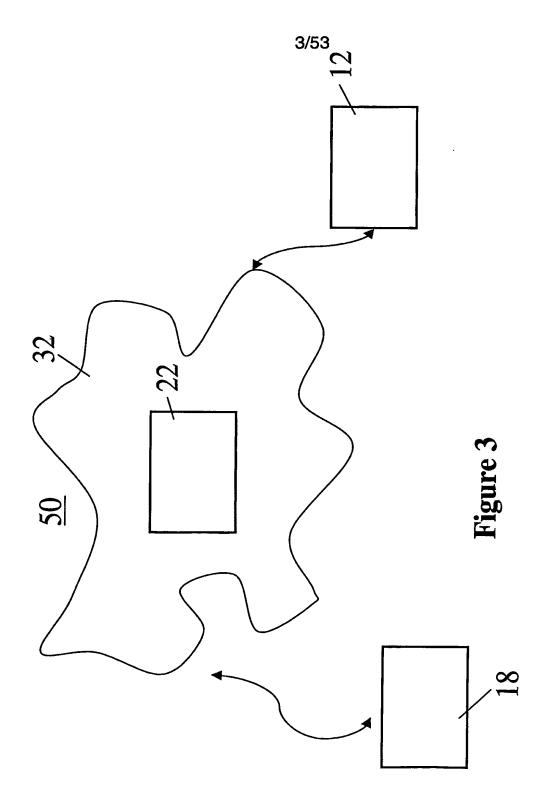


Figure 2



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# Fig. 4a

### Fig. 4b

#### Fig. 4c

### Fig. 4d

Score = 22.3 bits (11), Expect = 0.66
Identities = 11/11 (100%)
Strand = Plus / Minus

Query: 146 acttccagagg 156 |||||||||| Sbjct: 760 acttccagagg 750

## Fig. 4e

Score = 22.3 bits (11), Expect = 0.66
Identities = 11/11 (100%)
Strand = Plus / Minus

Query: 146 acttccagagg 156 ||||||||||| Sbjct: 760 acttccagagg 750

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Score = 22.3 bits (11), Expect = 0.66
Identities = 11/11 (100%)
Strand = Plus / Plus

# Fig. 4f

Score = 22.3 bits (11), Expect = 0.66
Identities = 11/11 (100%)
Strand = Plus / Plus

Query: 100 ggaaaacacac 110 |||||||||| Sbjct: 2047 ggaaaacacac 2057

### Fig. 4g

## Fig. 4h

Score = 22.3 bits (11), Expect = 0.66

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Identities = 11/11 (100%)
Strand = Plus / Plus

## Fig. 4i

## Fig. 4j

# Fig. 4k

53BP1_76P OF2: 2018	53BP1	10394	76P	6837	Or:	3046	OF1:	5463
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Query: 7492 7551	gcagcgtct	gcttcccag	gttcaagcaat	tetectgte	tcag	cctcct	gagta	gctggga
Sbjct: 3053 2994		 gcttcccag	gttcaagcaat	tetectgte	 tcage	lllll	 gagta	 gctggga
Query: 7552 7611	ttacaggca	catgccacc	acacctggcta	atttttgta	tttt	tagtag	aatcg	aggtttc
Sbjct: 2993 2934	 ttacaggca		(          acacctggcta		  tttt	 tagtag	iiiii aatcg	 aggtttc
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Sbjct: 2933 2874	atcatgttgg		gtctcaaactc		  ggtga	 atccgc	ccgcc 	 teggeet
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7731 Sbjct: 2873 2814				  caccatgeo	  cggc	 ctaaga	 aatac	 ttttaag
Query: 7732	tatattttca	ıttagctaga	attgcccaat	.ctgtgtagg	tata	aattac	ttggt	ataggga
7791 Sbjct: 2813 2754								
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7851 Sbjct: 2753					  taata	  acato	IIIII	
2694	gagagaaagu				-5900	Fig	_	

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2634
Query: 7912 atattgtttgtttaccgctgtatctcccacagcttgaacagtaccaaggtacgtagtagg
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RQ37
Sbjct: 2573 tgctcaataaatgactattgaataaatgaacatatccaacaaatgttctcaatgtaaage 2514
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Strand = Plus / Minus

Fig. 5a continued

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	4342	
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Fig. 5a continued

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         Sbjct: 4042 tgccaaaagttgagtggaattgggcacagctctgtttcctgacagttaaaaaagacctca
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3708
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Fig. 5a continued

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6957	0090	
-	3647	atttcaggctttgtgggccatttgatccatcacaactactcgcctttgctgtgagggcat
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3468		
Ouerv:	7078	gtgatetttagttgataatageagggaataagttgteagagetteeeagtgtgtgt
7137		;
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DOPE		
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3288		
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Fig. 5a continued

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Identities = 147/147 (100%)
Strand = Plus / Minus
Query: 5758 ggcaaccccgtgaaaatcctttccagaatctgaaggtactcttggtatcagaccaacagc
5817
         Sbjct: 5159 ggcaaccccgtgaaaatcctttccagaatctgaaggtactcttggtatcagaccaacage
5100
Query: 5818 agaacttcctggagctctggtctgagatcctcatgactggtggtgcagcctctgtgaagc
5877
         Sbjct: 5099 agaacttcctggagctctggtctgagatcctcatgactggtggtgcagcctctgtgaagc
5040
                                  Fig. 5a continued
```

#### 13/53

Query: 5878 agcaccattcaagtgcccataacaaag 5904 Sbjct: 5039 agcaccattcaagtgcccataacaaag 5013 Score = 281 bits (142), Expect = 9e-78 Identities = 142/142 (100%) Strand = Plus / Minus Query: 8920 ctgcccagagttccaccagcctgggtatagtatttgttataatctagtcgtaacagtagt 8979 Sbjct: 2274 ctgcccagagttccaccagcctgggtatagtatttgttataatctagtcgtaacagtagt 2215 Query: 8980 tgagccaaatctgagttgatctgatgattccgaacactggagagaatcttgaacaggagt 9039 Sbjct: 2214 tgagccaaatctgagttgatctgatgattccgaacactggagagaatcttgaacaggagt 2155 Query: 9040 gaagactggcggctaaagccct 9061 Sbjct: 2154 gaagactggcggctaaagccct 2133 Score = 226 bits (114), Expect = 5e-61 Identities = 117/118 (99%) Strand = Plus / Minus Query: 9673 ccttcacgagaatgctcagctgggcggctccacgctcatccagtgggcctaggttctgac 9732 Sbjct: 2135 ccttcacgagaatgctcagctgggcggctccacgctcatccagtgggcctaggttctgac 2076 man maaniimminniimmeelelimm Score = 190 bits (96), Expect = 3e-50 Identities = 96/96 (100%) Strand = Plus / Minus Query: 5463 gaatttttggaaattcctcctttcaacaagcagtatacagaatcccagcttcgagcagga 5522 Sbjct: 6812 gaatttttggaaattcctcctttcaacaagcagtatacagaatcccagcttcgagcagga 6753 Fig. 5a continued

#### 14/53

Score = 52.0 bits (26), Expect = 2e-08 Identities = 26/26 (100%)
Strand = Plus / Minus

Fig. 5a continued

#### 15/53

CIDEB	l_BLTR2 CIDEB1	2289 BI	LTR2 6530	OL: 2254	OF1: 17	OF2:
Score i Identii Plus	= 2727 (753.8 bits), E ties = 547/549 (99%),	xpect = 0. Positives	.0, Sum P( = 547/549	13) = 0.0 (99%), St	rands Minus	/
Query: 2191						
Sbjct:						
Query: 2131	2190 GTCATCAGTATGCTG	GGGAGTTTAG	GGACAGGAGG	CATTGGTAGGG	GATTAGATGTAG	CA
Sbjct: 120						
Query: 2071	2130 GCAGTCAGGCTGGGAT	CAAGATGCCT	TGGGGGACAT	CTTGATCTTGG	CCTTTCAGGGC	AAG
Sbjct: 180			TGGGGGACAT			l I AG
Query: 2011	2070 TGGGAGGCTAGAAAGG	etggctagga <i>i</i>	AAGAACAGCA	TTCTTCAGGTA	agggtatagact	TG
Sbjct:						
Query:	2010 GGATGTGAGGCGTTAT	'GCTGAAAGG'	TTCTGTCACG	AGGGGATCAGA	AGGACAGTGGGG	AAA
Sbjct:						
Query: 1891	1950 TTGGGTGGGTTATCTA	GCCTGTACTG	STCTGCAGGT	CTGAAATTTGA	ATGCTGTCATAG	rc
Sbjct: 360	·					
Query: 1831	1890 TTTGCAGTGGGTCGGT	TAQTA GQQT	<i>INDDESSTA</i> T	aranti dear	AKTAKITA TEG	gp d
Sbjct:	.					
Query:	1830 TGGAGGCGGCCCTTCT	GCTGCCACTG	CTCAGCCCCC	TCCACTGCATG	ACGAAGGGTGGA	ıG
Sbjct:						
Query: 1711	1770 GAAATTCCCAGCAACA					
Sbjct: 540			GCCTTGCAGC	agtgtggaggt		
			Fin	5b		

Fig. 5b

Query:	1710	TCCCTGAGT 1702
Sbjct:	541	1 TCCCTGAAT 549
		22 (365.4 bits), Expect = 0.0, Sum P(13) = 0.0 = 266/268 (99%), Positives = 266/268 (99%), Strands Minus /
Query: 698	75	7 CCTGTAGGCCCAGAAGGATGTCGGTCTGCTACCGTCCCCCAGGGAACGAGACACTGCTGA
Sbjct: 5485	5426	
Query: 638	697	7 GCTGGAAGACTTCGCGGGCCACAGGCACAGCCTTCCTGCTGCTGGCGCGCTGCTGGGGC
Sbjct: 5545	5486	
Query: 578	637	7 TGCCTGGCAACGGCTTCGTGGTGTGGAGCTTGGCGGGGCTGCAGCCTGCACGGGGGCGAC
Sbjct: 5605	5546	{
Query: 518	577	CGCTGGCGGCCACGCTTGTGCTGCACCTGGCGCTGCCGACGGCGCGGTGCTGCTCA
Sbjct: 5665	5606	
Query:	517	CGCCGCTCTTTGTGGCCTTCCTGACCGG 490
Sbjct:	5666	CGCCGCTCTTGTGGCCTTCCTGACCCG 5693
Score Identi Plus	= 131 ties	6 (363.8 bits), Expect = 0.0, Sum P(13) = 0.0 = 264/265 (99%), Positives = 264/265 (99%), Strands Minus /
Query: 362	421	CAAGCGTGCTCACCGGCCTGCTCAGCCTGCAGCGCTCCCCGCCCCCT
Sbjct: 5821	5762	CCAGCGTGCTCACCGGCCTGCTCAGCCTGCAGCGCTGCCTCGCAGTCACCCGCCCT
Query: 302	361	TCCTGGCGCCTCGGCTGCGCAGCCCGGCCCTGGCCGCCTGCTGCTGGCGGTCTGGC
Sbjct: 5881	5822	TCCTGGCGCCTCGGCTGCCAGCCCGGCCCTGCTGCTGGCGCGCTCTGGC
Query: 242	301	TGGCCGCCCTGTTGCTCGCCGTCCCGGCCGCCGTCTACCGCCACCTGTGGAGGGACCGCG
Sbjct: 5941	5882	TGGCCGCCCTGTTGCTCGCCGTCCCGGCCGCCGTCTACCGCCACCTGTGGAGGGACCGCG
		Fig. 5b continued

Fig. 5b continued

# 17/53

Query:	241	TATGCCAGCTGTGCCACCCGTCGCCGGTCCACGCCGCCCCACCTGAGCCTGGAGACTC
182		111111111111111111111111111111111111111
Sbjct: 6001	5942	TATGCCAGCTGTGCCACCCGTCGCCGCCACCTGAGCCTGGAGACTC
Query:	181	TGACCGCTTTCGTGCTTCCGT 157
Sbjct:	6002	TGACCGCTTTCGTGCTTCCGG 6026
Score Ident: Plus	= 920 ities	(254.3 bits), Expect = 0.0, Sum P(13) = 0.0 = 188/193 (97%), Positives = 188/193 (97%), Strands Minus /
Query: 1649	1708	CCTGAGTACTTTCTTTGGGCCAAGTCCTTGAAAGTCACAACTCATAGAGTAGAGCCCGTA
Sbjct:	724	
Query:	1648	GAATGTGGCTTTGACATTCAGGCTGCCAAAGAGGTCTCGAGGGTTTTGCTTGTACACGTC
	704	
Sbjct: 843	784	GAATGTGGCTTTGACATTCAGGCTGCCAAAGAGGTCTCGAGGGTTTTGGTTGTAGAGGTC
Query: 1529	1588	AAAGGTGAATCGGCCGATGTCCTTGCTGTGCTTGGGGCTCTCCCGTCCAGGCCCATATGA
Sbjct: 903	844	
Query:	1528	CAGCACTCCACTC 1516
Sbjct:	904	CAGCACTCCACTC 916
Score Ident. Plus	= 753 ities	(208.2 bits), Expect = 0.0, Sum P(13) = 0.0 = 157/165 (95%), Positives = 157/165 (95%), Strands Minus /
Query:	1529	ACAGCACTCCACTCCTTGTAGGGCTCCAGCTCTGACCAGACTGCAACACCCATCAGGCACG
	1120	
Sbjct: 1198	1139	
Query: 1410		TGTCATCCTCCAGCAGCTGGAAGAAGTCCTCACTGTCCACTGCAGTTCCATCCTCTA
Sbjct: 1258	1199	
Query:	1409	GCACCAGGGTTAGCACTCCATTCAGCAGTAGGGTCTCCAATGCTT 1365
Sbjct:	1259	GCACCAGGGTTAGCACTCCATTCAGCAGTAGGGTCTCCAATGCCT 1303
Score	<b>= 746</b>	(206.2  bits), Expect = 0.0, Sum $P(13) = 0.0$

Fig. 5b continued

```
Identities = 150/151 (99%), Positives = 150/151 (99%), Strands Minus /
Query: 1369 TGCTTTGGCTAGCAGCTCCTGGCGGTGGCAGCTGTCAGGCCTTTCCGGATGGTCCGCTT
1310
           2146 TACTTTGGCTAGCAGCTCCTGGCGGGTGGCAGCTGTCAGGCCTTTCCGGATGGTCCGCTT
Sbict:
2205
      1309 GTGATCACAGACACGGAAAGGTCGCTGGGGTGGAGCTGAGGTCCAGACCCTCCGTCC
Query:
1250
           14144411441441441441441444444
Sbjct:
      2206 GTGATCACAGACACGGAAAGGTCGCTGGGGTGGTGGAGCTGAGGTCCAGACCCTCCGTCC
2265
      1249 AAACTCCGAGCTTATATTAGATACTGACCTG 1219
Query:
           Sbict:
      2266 AAACTCCGAGCTTATATTAGATACTGACCTG 2296
 Score = 737 (203.7 bits), Expect = 0.0, Sum P(13) = 0.0
 Identities = 148/150 (98%), Positives = 149/150 (99%), Strands Minus /
Query: 1118 CTGCTCTTCCTCCTCGTGGTCGGAGGGGGGCTGGCTCACTGCTCTGGCTTCATTTT
1059
           ·Sbjct:
      3257: CTGCTCTTTCCTTCCTTGGTCGGAGGGGGCTGGCTCACTGCTCTGGCTTCATTTT
3316
Query:
      1058 CCAGAGCTGCCTGCAGTCACACTTAGGTCATCTTCTCACTTTTCTCCTTTTGCCG
999
           Sbjct:
      3317 CCAGAGCTGCCTGCAGTCACACTTAGGTCATCTTCTCTCACTTTTCTCCTTTTGCCG
3376
Query:
       998 ATTAGTGGACGTGACAGAGATGTGAATRTG 969
           111111111111111111111111111111
Sbict:
      3377 ATTAGTGGACGTGACAGAGATGTGAATGGG 3406
 Score = 714 (197.4 bits), Expect = 0.0, Sum P(13) = 0.0
 Identities = 146/150 (97%), Positives = 146/150 (97%), Strands Minus /
Plus
       166 TTCCTTTCGGCTGATGCTCGGCTGCTACAGCGTGACGCTGGCACGGCTGCGGGGCGCCCG
Query:
107
                Sbjct:
      6018 TCCTTTCGGGCTGATGCTCGGCTGCTACAGCGTGACGCTGGCACGGCTGCGGGGCGCCCG
6077
       106 CTGGGGCTCCGGGCGCGCGGGGGGGGGGGGCGGCTGGTGAGCGCCATCGTGCTTGC 47
Ouerv:
          6078 CTGGGGCTCCGGGCGCACGGGGCGCGGGTGGGCCGGCTGGTGAGCGCCATCGTGCTTGC
Sbjct:
6137
        46 CTTCGGCTTGCTCTGGGCCCCCTACCACGC 17
Query:
          11111111111111111111111111111111111111
      6138 CTTCGGCTTGCTCTGGGCCCCCTACCACGC 6167
Sbict:
```

Fig. 5b continued

```
Score = 638 (176.4 bits), Expect = 0.0, Sum P(13) = 0.0
  Identities = 130/133 (97%), Positives = 130/133 (97%), Strands Minus /
        962 GGGCAGGGATGTCCTTTGATGGCATCAAGACTTTAGCTTCTGGTGCGCTGTGTCCCAGC
 Query:
 903
                Sbjet:
       3404 GGGGCAGGGATGTCCTTTGATGGCATCAAGACTTTAGCTTCTGGTGCGCTGTGTCCCAGC
 3463
        902 TCTGATTTCAGTTGCAGCCGTGATGGACAGTTGCATGGAAGCTGAGACTCTCACTGACAG
 Ouerv:
 843
           Sbict:
       3464 TCTGATTTCAGTTGCAGCCGTGATGGACAGTTGCATGGAAGCTGAGACTCTCACTGACAG
 3523
 Query:
        842 TGAAACCCTCAAA 830
           1111111111111
       3524 TGAAACCCTCAAA 3536
 Score = 537 (148.4 bits), Expect = 0.0, Sum P(13) = 0.0
 Identities = 109/111 (98%), Positives = 109/111 (98%), Strands Minus /
Query: 1227 ACTGACCTGAGTAAGTCACTGGGGTTCAGAGCTGAGAGGTACTCCATGGTGGACCGGAGA
 1168
           Sbjct:
       2590 AGTCACCTGAGTAAGTCACTGGGGTTCAGAGCTGAGAGGTACTCCATGGTGGACCGGAGA
2649
Query:
       1167 GTTCCTTGCGGAACTTCTGGGCTGGTGGTTCTCCTGTGCTGGGGCT 1117
           Sbjct:
       2650 GTTCCTTCCCTGGAACTTCTGGGCTGGTGGTTCTCTCTGTGCTGGGGCT 2700
 Score = 394 (108.9 bits), Expect = 0.0, Sum P(13) = 0.0
 Identities = 82/86 (95%), Positives = 82/86 (95%), Strands Minus / Plus
Query:
       839 AACCCTCAAAATGAACACAATCCCTGCTTTCCTGCCAAGGATCCTTGTAGGGTCCCCCAG
780
                 Sbjct:
      3526 AAACCCTCAAATGAACACAATCCCTGCTTTCCTGCCAAGGATCCTTGTAGGGTCCCCCAG
3585
       Ouerv:
           3586 CTTCCCCACTTTTTTTCTGTGTCCTG 3611
Sbict:
 Score = 370 (102.3 bits), Expect = 0.0, Sum P(13) = 0.0
 Identities = 74/74 (100%), Positives = 74/74 (100%), Strands Minus / Plus
       493 CCGGCAGGCCTGGCCGCTGGGCCAGGCGGGCTGCAAGGCGGTGTACTACGTGTGCGCGCT
Query:
434
          5691 CCGGCAGGCCTGGCCGCTGGGCCAGGCGGGCTGCAAGGCGGTGTACTACGTGTGCGCGCT
Sbict:
5750
       433 CAGCATGTACGCCA 420
Ouerv:
                                   Fig. 5b continued
          111111111111111
Sbjct: 5751 CAGCATGTACGCCA 5764
```

### 20/53

Score = 2736 (756.0 bits), Expect = 0.0, Sum P(5) = 0.0 Identities = 548/549 (99%), Positives = 548/549 (99%), Strands Minus / Plus  Query: 1384 TTTTGTTAGTTTGAGGGGAAGGGTATGAAGACAGATCTCAAGGTAAAGTCAGAGAGGGCT 1325 Sbjct: 1 TTTTGTTAGTTTGAGGGGAAGGGTATGAAGACAGATCTCAAGGTAAAGTCAGAGAGGGCT	
1325	
	50
Query: 1324 GTCATCAGTATGCTGGGGAGTTTAGGGACAGGAGGCATTGGTAGGGGATTAGATGTAGCA	
Query: 1264 GCAGTCAGGCTGGGATCAAGATGCCTGGGGGACATCTTGATCTTGGCCTTTCAGGGCAAG	
Query: 1204 TGGGAGGCCAGAAAGGTGGCTAGGAAAGAACAGCATTCTTCAGGTAAGGGTATAGACTTG	
Query: 1144 GGATGTGAGGCGTTATGCTGAAAGGTTCTGTCACGAGGGGATCAGAGGACAGTGGGGAAA	
:	
Query: 1084 TTGGGTGGGTTATCTAGCCTGTACTGTCTGCAGGTCCTGAAATTTGATGCTGTCATAGTC	
Query: 1024 TTTGCAGTGGGTCGGTTGGAATGATTCTGGGGGCAGAAGCTCAGAGCCCCTTAGTAGGAA	
Sbjct: 361 TTTGCAGTGGGTCGGTTGGAATGATTCTGGGGGCAGAAGCTCAGAGCCCCTTAGTAGGAA	
Query: 964 TGGAGGCGGCCCTTCTGCTGCCACTGCTCAGCCCCCTCCACTGCATGACGAAGGGTGGAG	
Sbjct: 421 TGGAGGCGGCCCTTCTGCTGCCACTGCTCAGCCCCCTCCACTGCATGACGAAGGGTGGAG	
Query: 904 GAAATTCCCAGCAACATATGGCCCAGGCCTTGCAGCAGTGTGGAGGTCCAACGAAGGAGC	
Sbjct: 481 GAAATTCCCAGCAACATATGGCCCA( )GAAGGAGC  Fig. 5c	

Fig. 5c

#### 21/53

Query: 844 TCCCTGAGT 836 541 TCCCTGAAT 549 Sbjct: Score = 1787 (493.8 bits), Expect = 0.0, Sum P(5) = 0.0Identities = 359/361 (99%), Positives = 359/361 (99%), Strands Minus / Plus 361 ACTGACCTGAGTAAGTCACTGGGGTTCAGAGCTGAGAGGTACTCCATGGTGGACCGGAGA Query: 302 Sbjct: 2590 AGTCACCTGAGTAAGTCACTGGGGTTCAGAGCTGAGAGGTACTCCATGGTGGACCGGAGA 2649 301 GTTCCTTCCCTGGAACTTCTGGGCTGGGTGGTTCTCTCTGTGCTGGGGCTTTAGTGGTG Query: 242 Sbjct: 2650 GTTCCTTCCCTGGAACTTCTGGGCTGGTGGTTCTCTCTGTGCTGGGGCTTTAGTGGTG 2709 241 TTTTCTGTTACAAACCTGGGATCTCAGCCCAGGACAAGGTGGGAATGAGTCAAGCCTGGA Query: 182 Sbjct: 2710 TTTTCTGTTACAAACCTGGGATCTCAGCCCAGGACAAGGTGGGAATGAGTCAAGCCTGGA 2769 Query: 122 Sbjct: 2829 121 GGCCAGATGGGGTCCTGGAGGAAGAATTGCCTGGCAAAAGCCATTGGAGCTTGTATGTGT 62 Query: 2830 GGCCAGATGGGGTCCTGGAGGAAGAATTGCCTGGCAAAAGCCATTGGAGCTTGTATGTGT Sbjct: 2889 61 GTCTTTGGTGATGACATGTGTTGTGAGGGTAGATGGGAACCATGTAAAAGGATGAAATGT 2 Query: 2890 GTCTTTGGTGATGACATGTTGTTGTGAGGGTAGATGGGAACCATGTAAAAGGATGAAATGT Sbict: 2949 Query: 1 G 1 Sbjct: 2950 G 2950 Score = 965 (266.6 bits), Expect = 0.0, Sum P(5) = 0.0Identities = 193/193 (100%), Positives = 193/193 (100%), Strands Minus / Plus 842 CCTGAGTACTTTCTTTGGGCCAAGTCCTTGAAAGTCACAACTCATAGAGTAGAGCCCGTA Query: 783 Sbjct: 724 CCTGAGTACTTTCTTTGGGCCAAGTCCTTGAAAGTCACAACTCATAGAGTAGAGCCCGTA 783 782 GAATGTGGCTTTGACATTCAGGCTGCCAAAGAGGTCTCGAGGGTTTTGCTTGTACACGTC Query: 723

Fig. 5c continued

Sbjct: 843	
Query: 663	722 AAAGGTGAATCGGGCGATGTCCTTGCTGTGCTTGGGCCTCTCCCGTCCCAGGCCATATGA
Sbjct: 903	
Query:	662 CAGCACTCCACTC 650
Sbjct:	904 CAGCACTCCACTC 916
	= 757 (209.2 bits), Expect = 0.0, Sum $P(5) = 0.0$ cies = 161/173 (93%), Positives = 161/173 (93%), Strands Minus /
Query: 612	671 GCCATATGACAGCACTCCACTCCTTGTAGGGCTCCAGCTCTGACCAGACTGCAACACCAT
Sbjct: 1190	
Query: 552	611 CAGGCACGTGTCATCCTCCAGCAGCTGGAAGAAGTCCTCACTGTCCACTGCAGTTCCATC
Sbjct: 1250	
Query:	551 CTCCTCTAGCACCAGGGTTAGCACTCCATTCAGCAGTAGGGTCTCCAATGCTT 499
Sbjct:	1251 CTCCTCTAGCACCAGGGTTAGCACTCCATTCAGCAGTAGGGTCTCCAATGCCT 1303
Score = Identit: Plus	746 (206.1 bits), Expect = 0.0, Sum $P(5) = 0.0$ ies = 150/151 (99%), Positives = 150/151 (99%), Strands Minus /
Query: 444	503 TGCTTTGGCTAGCAGCTCCTGGCGGGTGGCAGCTGTCAGGCCTTTCCGGATGGTCCGCTT
Sbjct: 2 2205	
Query: 384	443 GTGATCACAGACACGGAAAGGTCGCTGGGGTGGGGGTGGAGCTCAGACCCTCCGTCC
Sbjct: 2 2265	
Query:	383 AAACTCCGAGCTTATATTAGATACTGACCTG 353
Sbjct: 2	266 AAACTCCGAGCTTATATTAGATACTGACCTG 2296

Fig. 5c continued

#### 23/53

APAF1\_EB1 APAF1 7042 EB1a 1752 OL: 141 OF1: 6889 OF2: 1612 Score = 705 (194.8 bits), Expect = 3.9e-52, P = 3.9e-52Identities = 141/141 (100%), Positives = 141/141 (100%), Strands Minus / Plus Query: 7029 TGTTTTTCAAAACAATTTTGTGAATTTTTTTTACAAAAATTTTTTAAATTCATATTTT 6970 Sbjct: 1612 TGTTTTCAAAACAATTTTGTGAATTTTATTTTTACAAAAATTTTTTAAATTCATATTTT 1671 Query: 6969 AAAATGTATACCAAGGCAAAAAATCATATAAGCTATATCATAAATACAAGAGTTTCAAA 6910 Sbjct: 1672 AAAATGTATACCAAGGCAAAAAAATCATATAAGCTATATCATAAATACAAGAGTTTCAAA 1731 Query: 6909 ACATACAAGAGACATATAATG 6889 Sbjct: 1732 ACATACAAGAGACATATAATG 1752

Fig. 5d

```
4863
                                        OL: 236 OF1: 2175
                   2457
                        MINK2
Hum AChR_MINK2
            AChR
OF2: 4583
 Score = 218 bits (110), Expect = 2e-59
 Identities = 110/110 (100%)
 Strand = Plus / Minus
2313
        4728
Query: 2314 ctccctgctccctccaccggggaagggcatgggctagaagaggaga 2363
         Sbjct: 4727 ctccctgctccctccaccggggaagggcatgggctagaagaggaga 4678
Score = 133 bits \{67\}, Expect = 9e-34 Identities = 74/75 (98\%), Gaps = 1/75 (1\%)
Strand = Plus / Minus
Query: 2384 aatgttttggctg-cggggtcccccctccattccctggagtttgggggaaggggaatcat
2442
        Sbjct: 4657 aatgttttggctggcggggtcccccctccattccctggagtttgggggaaggggaatcat
Query: 2443:taaagtgctttcaga 2457
        maiamai
Sbjct: 4597 taaagtgctttcaga 4583
Score = 103 bits (52), Expect = 8e-25
Identities = 52/52 (100%)
Strand = Plus / Minus
Query: 2175 agctggttgaattgtctttattaacaaacaggatatccaaggccactacatt 2226
        Sbjct: 4863 agctggttgaattgtctttattaacaaacaggatatccaaggccactacatt 4812
```

Fig. 5e

Mus_ACI 934		Mus_AChR OF2: 506	1590	Anti_Mu	s_AChR	2227	OL: 672	OF1:
					7e-254, Sum = 245/246 (9			/
Query: 1528	158				CGGCCTGTTTC			
Sbjct: 565	50							
Query: 1468	1527				TCATGGTTGGAT			
Sbjct: 625	566							
Query: 1408	1467				GAAGATGAGAGT			
Sbjct: 685	626							
Query: 1348	1407				CAGGGCCTTCCC			
Sbjct: 745	686				CAGGGCCTTCCC			
Query:	1347	TCCTCT 134	2					•
Sbjct:	746	TCCTGT 751						
					e-254, Sum P = 198/207 (9			1
Query: 1190	1249				GCCGATGCCTCT			
Sbjct: 1066	1007	 GCAGTGCTTAC						
Query: 1130	1189				CCGCTCTGAGCA			
Sbjct: 1126	1067				CCGCTCTGAGCA			
Query: 1070	1129				CTCTGGGGGTG			
Sbjct: 1186	1127							
Query:	1069	CAGCAGCTCTA				F	Fig. 5f	•

Sbjet: 1187 CAGCAGCTCTAATAAAATCTGCAGCCG 1213
Score = 591 (163.3 bits), Expect = 3.7e-254, Sum P(4) = 3.7e-254 Identities = 119/120 (99%), Positives = 119/120 (99%), Strands Minus / Plus
Query: 1053 ATCTGGCGCAGCCGAGGGGATGTAGCATGAGTCGTTGGCGTCCTCAAAGATACGTTGAGC 994
Query: 993 ACGATGACGCAATTCATGACAATGAGCGTGGCAACCACCATGACGAATATAAGATACCTG
Sbjct: 1337 ACGATGACGCAATTCATGACAATGAGCGTGGCAACCACCATGACGAATATAAGATACCTG
Score = 546 (150.9 bits), Expect = 3.7e-254, Sum P(4) = 3.7e-254 Identities = 110/111 (99%), Positives = 110/111 (99%), Strands Minus / Plus
Query: 1346 CCTCTCCAGTGGCTTCCTGGTCTCTTGTGCTCTCAGCCACAAAGTTCACAGCATCCACAC 1287
Query: 1286 AGCAGCGGATTTCTGGGGCTGCAGCACCCAGGTTCTGGCAGAGGGCTGCGG 1236

Fig. 5f continued

Cyclin OF1: 8		CyclinE2 OF2:	2714 2006	Anti_CyclinE2	6773	OL: 1855
	ities			Rpect = 0.0, Sum F Positives = 1577		Strands Minus
Query: 2655	271			AGAAGAAAAAAGTTT		
Sbjct: 2065	200					
Query: 2595	265			TTTAACTTTTATTTTT		
Sbjct: 2125	206					
Query: 2535	259	4 ATTAAAA	GGTTAAGTTTA	TATAATACATATGTACA	CAATTAGTGGTGTT	TTCTTTTCAGA
Sbjct: 2185	2120					· · · · · · · · · · · · ·
Query: 2475	253	4 СААДАТАС	CTGAAACAAAT	ATTAGTTTAAAAACAAA	CTATACAGAAGACT	TCATACCGTAA
Sbjct: 2245	2186					
Query: 2415	2474	CAATAAAT	'GTATAGTTTC	TTCAAAGGGAGAAGAGA	TTCACATATCTGAT	часаааатааа
Sbjct: 2305	2246	CAATAAAT				
Query: 2355	2414	CTAGCAAT	CTAGTTTTCT	AATCTACTTTATGAGGC	TGGATTTTTTTTT	AGAAAAGCTAA
Sbjct: 2365	2306					
Query: 2295	2354	TTTAAAAT	ATTTAGAAATI	AGCTAGCCTATGTACAG	CAAGTTTTCATGTCT	TTTTTTAATA
Sbjct: 2425	2366					
Query: 2235	2294	AATAGATT	rctaggagtc <i>i</i>	AGTATATATTTAATACT(	CTTCTTCCTTAAGA	AATAGAAG <sub>.</sub> TT
Sbjct: 2485	2426					
Query:	2234	TAGGTCAAG	STGTTAAGCTT	TATCACTTTGACACTG	CCTTATCTCACAAT	GGAGGAATTT
2175		11111111	1111111111	111111111111111111111111111111111111111		

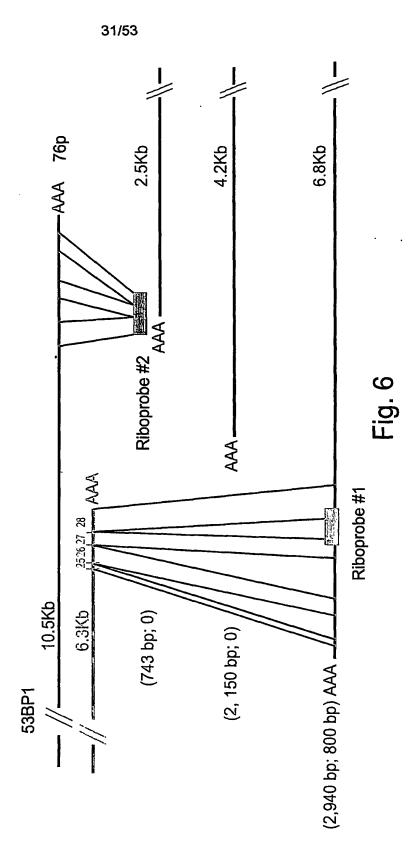
Sbjct: 2545	2486	TAGGTCAAGTGTTAAGCTTTATCACTTTGACACTGTCCTTATCTCACAATGGAGGAATTT
Query:	2174	AGAAAGGACCTTAACAGTTTCACAAACATAAATAAAGCCTTAGTCACACTAAATTAAAAA
2115 Sbjct:	2546	
Query:	2114	AAAAAATTCCTTAGGGATATCTTAGAGTAGTAAAGTGACTTCCTCATATAAATAGTTTGA
2055 Sbjct:	2606	
2665 Query:	2054	AAGGGTACTTAAGTTTTTCACCCAAATTGTGATATACAAAAAGGTTATTACCAAGCAACC
1995 Sbjct:	2666	
2725 Query:		TACATGTCAAGAAAGCCCCAGTTAGGAAGGAGCCACAGCATTTATCTTGTTTATAATTTC
1935 Sbjct:		
2785		TTTGGTACTCCCACTGTTTAGAGCACAGGTTGAACACCATGTTCATCTAAGCCTTATTAG
Query: 1875		
Sbjct: 2845		
Query: 1815		TTAAAAAATGTGTTATGGCAAGGCAAATAAACTAGTTTAAAAAACATTAAATTTCACCAT
Sbjct: 2905		TTAAAAAATGTGTTATGGCAAGGCAAATAAACTAGTTTAAAAAAACATTAAATTTCACCAT
Query: 1755		TTGTAGAAATTCAAGTTTTATAATAGCTTGCTATAGCAGCTATAGATAAATTAGTCACCT
Sbjct: 2965	2906	TTGTAGAAATTCAAGTTTTATAATAGCTTGCTATAGCAGCTATAGATAAATTAGTCACCT
Query: 1695	1754	TATTACAAAACTAAACCTTTGTAAACAAGTTTAAATTTAATTTTCAAGAACCAAATTGCA
Sbjct: 3025	2966	TATTACAAAACTAAACCTTTGTAAACAAGTTTAAATTTAATTTTCAAGAACCAAATTGCA
Query: 1635	1694	CTAGTCAAGAGTGTAGGAATTTTGAGAATCTAACAACTAGATTCAAAGTACTGTATCACT
Sbjct: 3085	3026	CTAGTCAAGAGTGTAGGAATTTTGAGAATCTAACAACTAGATTCAAAGTACTGTATCACT
Query: 1575	1634	TAGTATACCCTTTAAGGTAGCACTTATCCAGTCCAAAACTCCAGTGACAAAATTCCTAGT  Fig. 5g continued

Sbjct: 3145	3086	
Query: 1515	1574	TTATCAAGATAAACACAGTAACACTGGATTAAAGGAAAAACATTGCTATGGTATAGACTG
Sbjct: 3205	3146	
Query: 1455	1514	TGGTTGGCTTCTATCCAGTAACCTTGGGAATGAAGACATCTTTGTAAACAAGTCCTGCTG
Sbjct: 3265	3206	
Query: 1395	1454	TTTCTTTAACAGCTAACATAGGAAATAATTAAATGTATTCTTTAGTGCCAATTGTAAGTT
Sbjct: 3325	3266	
Query: 1335	1394	TTAAAATCAGAATGGCAGTGTAACTTGTGAATTGGCTAGGGCAATCAAT
Sbjct: 3385	3326	
Query: 1275	1334	TTTCTGTAAAACTTTAGTAGTTCAGTGATACCAGTTCTACCCAATCTTGGTGAATTCCAA
Sbjct: 3445	3386	
Query: 1215	1274	CTTGTTTGCTTAGTTATCTTCTTTAGTGTTTTCCTGGTGGTTTTTCAGTGCTCTTCGGTG
Sbjct: 3505	3446	
Query: 1155		GTGTCATAATGCCTCCATTGCACACTGGTGACAACTGTCCCCCTTTTCTGAAGGTGTTTA
Sbjct: 3565	3506	
Query:		TGTAATTTACTTCCTCC 1138
Sbjct:		TGTAATTTACTTCCTCC 3582
Score = Identit Plus	= 805 cies =	(222.4 bits), Expect = 0.0, Sum $P(4) = 0.0$ 161/161 (100%), Positives = 161/161 (100%), Strands Minus /
Query: 1080	1139 (	CCAGCATAGCCAAATAGTTTGTATGTGTCTGGATATTATGTCTGTC

Fig. 5g continued

Sbjct: 4026	3967	CCAGCATAGCCAAATAGTTTGTATGTGTCTGGATATTATGTCTGTC
Query: 1020	1079	TCTTAAAAGTCTTCAGCTTCACTGGACTAGTACTTTTTACTACATTGACAAAAGGTACCA
Sbjct: 4086	4027	TCTTAAAAGTCTTCAGCTTCACTGGACTAGTACTTTTTACTACATTGACAAAAGGTACCA
Query:	1019	TCCAATCTACACATTCTGAAATACTGTCCCACTCCAAACCT 979
		111111111111111111111111111111111111111
Sbjct:	4087	TCCAATCTACACATTCTGAAATACTGTCCCACTCCAAACCT 4127
Score = Identit Plus	= 581 ties :	(160.5 bits), Expect = 0.0, Sum P(4) = 0.0 = 117/118 (99%), Positives = 117/118 (99%), Strands Minus /
Query: 923	982	ACCTGAGGCTTTCTTAACCACTTCAATGGAGGTAAAATGGCACAAGGCAGCAGCAGTCAG
		111111311111111111111111111111111111111
Sbjct: 4674	4615	ACCTGAGGCTTTCTTAACCACTTCAATGGAGGTAAAATGGCACAAGGCAGCAGCAGTCAG
Query:	922	TATTCTGTACTGGAACTCTAATGAATCAATGGCTAGAATACACAGATCTAAAAGCTGA 865
Sbjct:	4675	TATTCTGTACTGGAACTCTAATGAATCAATGGCTAGAATACACAGATCTAAAAGCTAA 4732

Fig. 5g continued



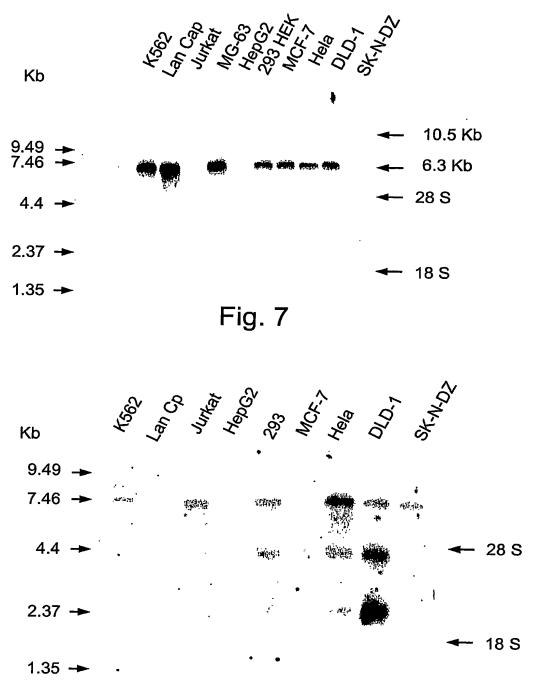
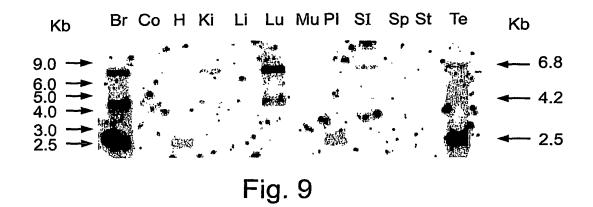


Fig. 8



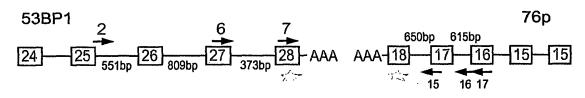


Fig. 10

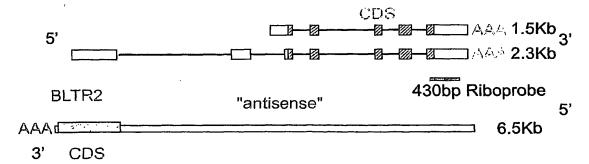


Fig. 11

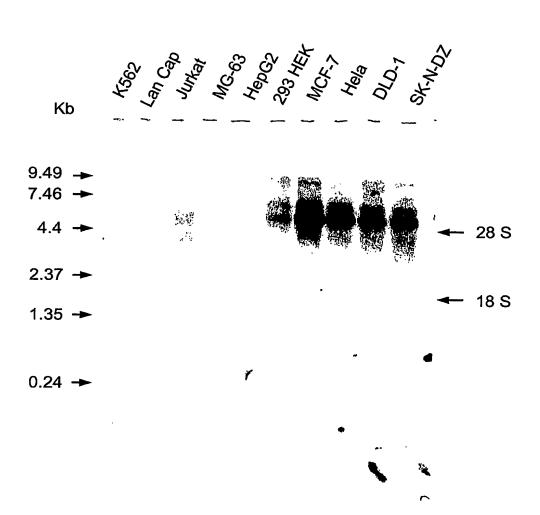


Fig. 12

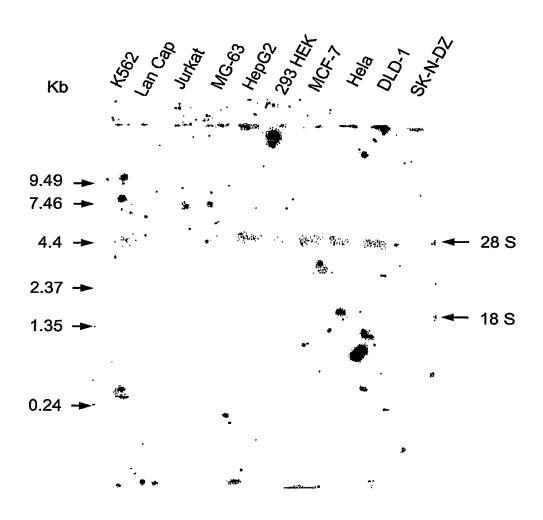
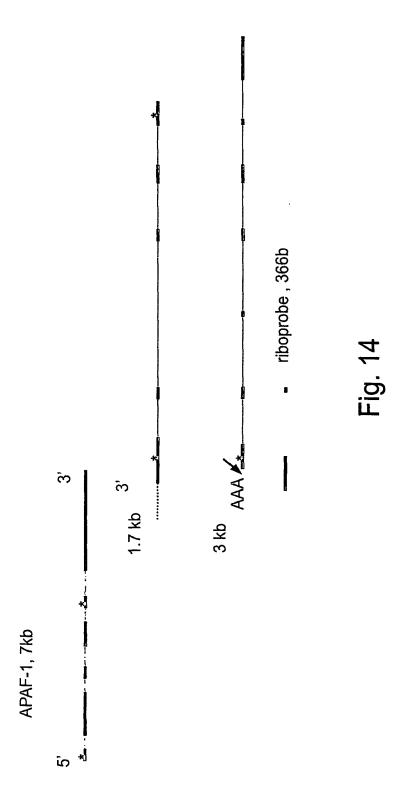
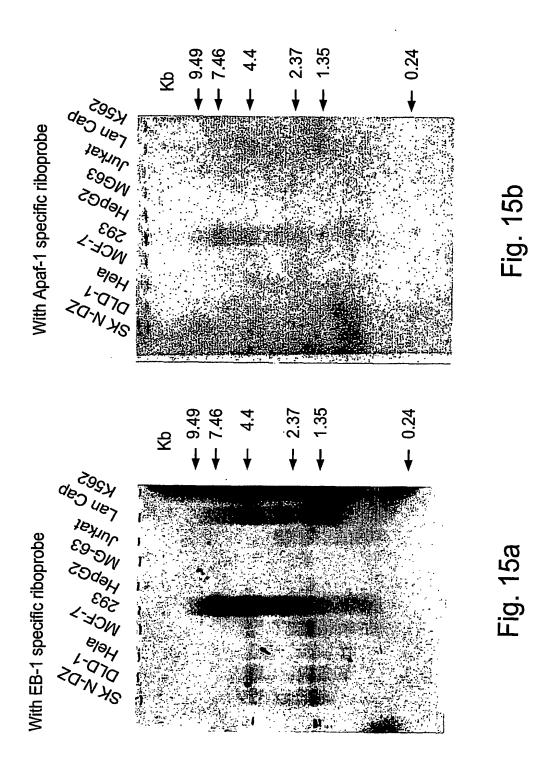
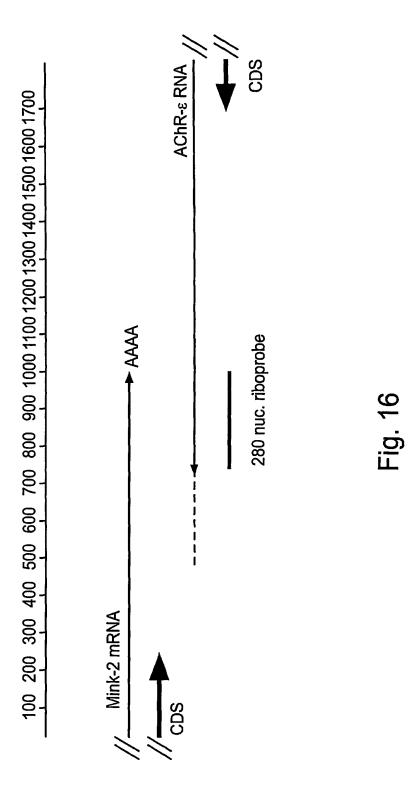
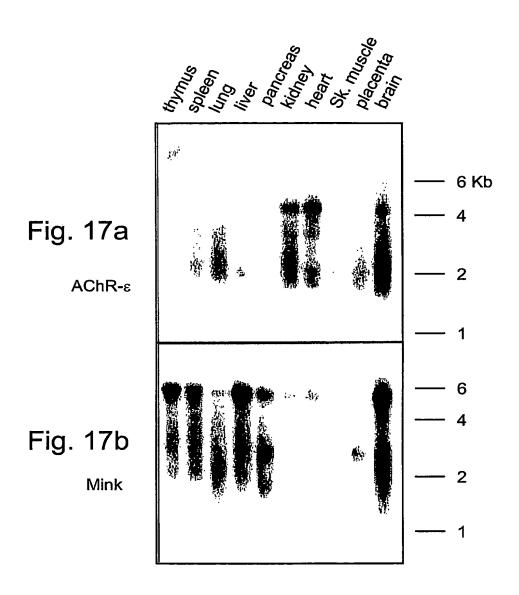


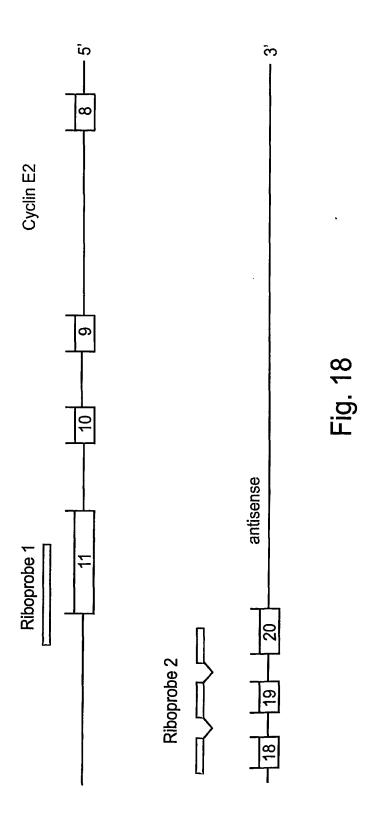
Fig. 13











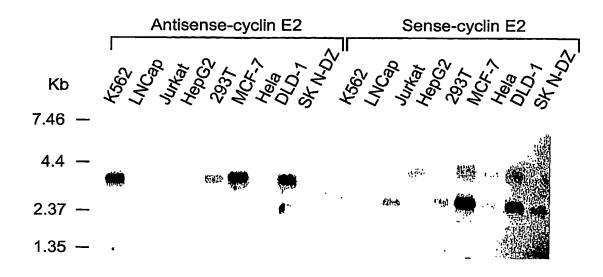


Fig. 19a

Fig. 19b

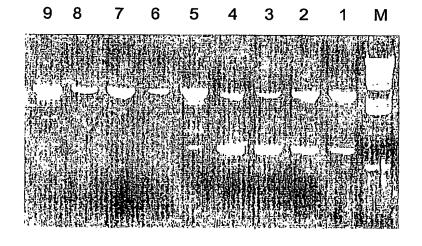
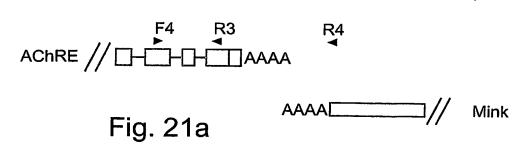
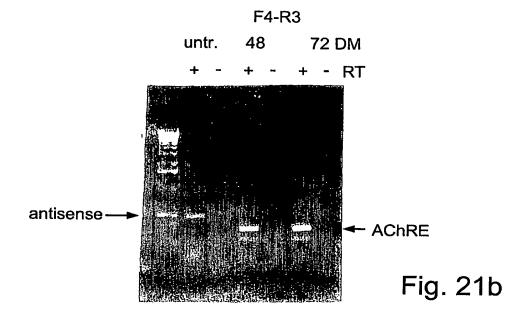


Fig. 20

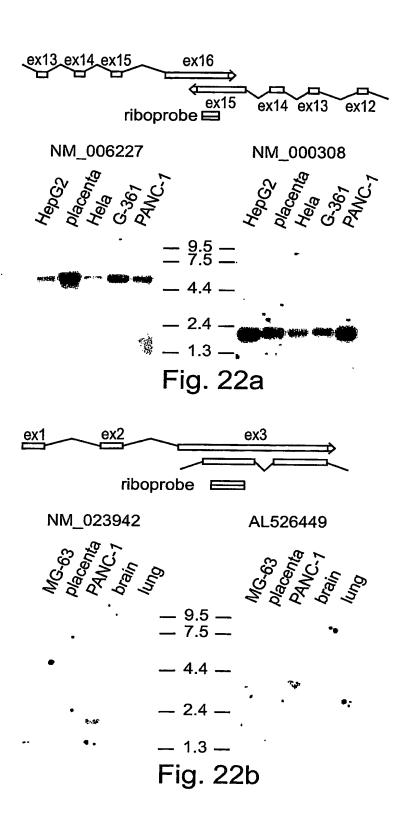




F4-R4
untr. 48 72

antitese

Fig. 21c





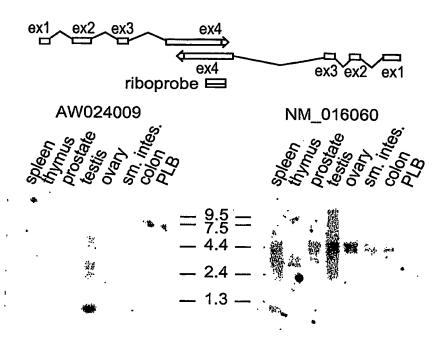


Fig. 22c

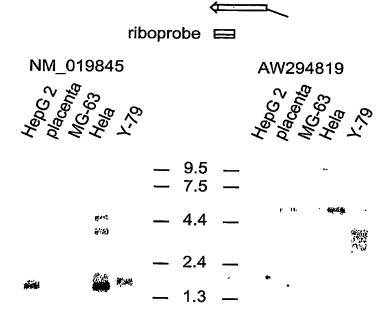


Fig. 22d



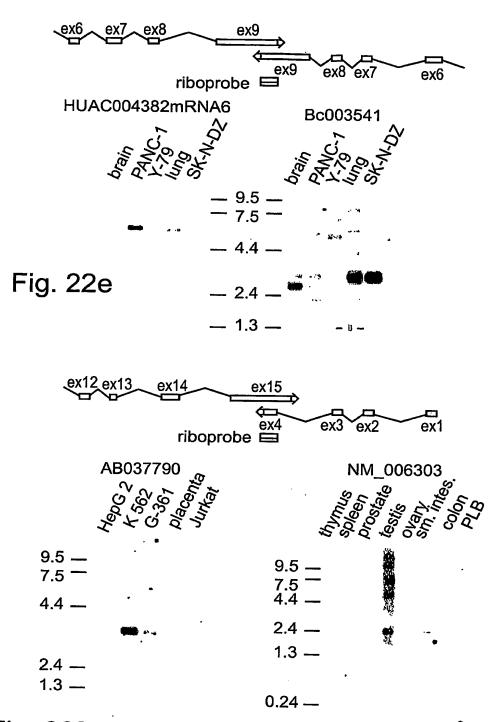


Fig. 22f

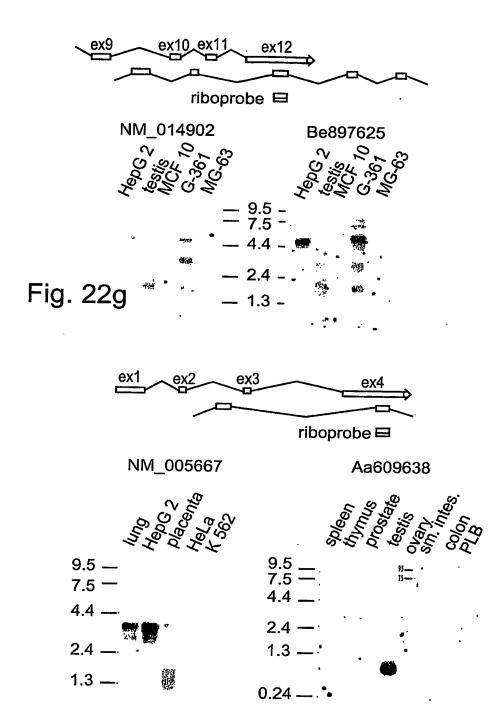
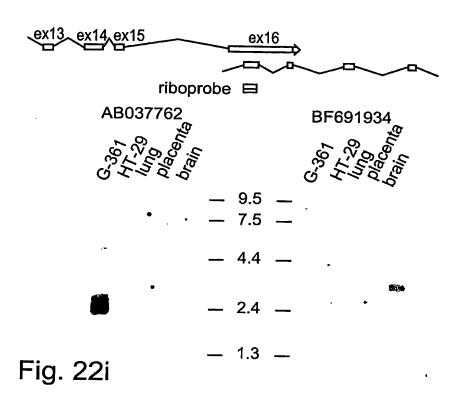


Fig. 22h





9.0

8.

0.79

0.58

0.77

0.92

¥	ις:	0	0.	1	0	0	0	1	ļ	-	
	64	1.09	1.33	1.25	0.9	1	1.25	1	1	1.01	1
HeLa	46b	0.91 1.09	1.38	1.37	1.15	1.49 1	1.28	1.14	1	2.09	1
4	63		1.87	).54	3.55		0.49		1	339 (	
NI564	45	2.24	1.28	0.91	1.06	0.79	0.89	0.78	1	1.32	1
=	79 45	1.12	1.65	).75	3.65	1.01	0.63	1.3		0.64	1
SNUI	36b	1.01 1.12 2.24 2.6	1.88	0.88	0.8	0.74 1.01 0.79 1	0.76	0.59 1.3   0.78   1	1	98.0	1 1 1 1
83	28		0.8	1.28	2.37	1	0.83		-1	.04   0.71   0.86   0.64   1.32   0.39   2.09	-1
MG-63	35	0.78 0.8	0.86 0.47 0.52 0.87 0.73 1.03 0.8 1.88 1.65 1.28 0.87 1.38 1.33	1.95   1.28   0.88   0.75   0.91   0.54   1.37   1.25	2.34 2.37 0.8 0.65 1.06 0.55 1.15	1	1.84   0.81   0.69   1.07   1.26   1.56   1.14   1.11   0.85   1.55   1.27   1.14   0.83   0.76   0.63   0.89   0.49   1.28   1.25	1.35 0.47 1	-1	1.04	2.32 1.14 1.78 -1 -1
	89		.73			1.78	1.27	1.35	-	1	82.
SK-N DZ	34b	99.	.87	.1	.61		.55			92	.14   1
	- 2e	442   0.56   0.71   0.89   0.89   0.62   0.95   0.71   0.73   0.41   0.47   0.66   0.62	.52	0.82 0.88 1.1 0.95	0.82 1.03 0.66 1.61 1.57	1.16 -1	.85	0.71 1.42 0.87		0.69 1.65	2.32
HT-29	33b 6	141	.47	.82	.03		11.	171	_		1 2
	55b 3	73 0	86.		.82	1	141			1.09	1 1
K-562		1 0	37 0	26 1.		7	56 1	42	-		_
×	31b	0.7	0	1.	1.	1.51	- 6	9 0.84	7	2 1.76	1-
3 × 8	78	0.9	0.5	1.0	0.9	1.5	1.2	1.79	- - - - -	1.22	1
HEK -293	30b	0.62	0.53	1.16	0.94	١-	1.07	6.0	-	1.34	_
2	53	0.89	10 0.97 0.96 0.82 0.78 0.53 0.51 0.97	0.78	426 1.82 1.49 0.65 0.54 0.94 0.91 1.32	1.04 1.27 0.78 0.84 -1	69.0	ļ	1	0.65 0.53 1.34	1.28 1.15 0.46 0.78 1 1
ES-2	29	0.89	0.82	0.85	9.0	0.78	0.81	1.34 1.95 0.35 1	0.93 1	0.65	0.46
	52b	0.71	96.0	1.42	1.49	1.27	1.84	1.95	_	-	1.15
Y79	28	0.56	0.97	1.43	1.82	1.04	2	1.34	-	<del>-</del> -	1.28
Virtu Y79 al	lood		1710	2282		103	959 2	197	8	357	69
Actu al	lood	472	1847 17	CTRL 2245 2282 1.43 1.42 0.85 0.78 1.16 1.06 1.26 1.02	378	95	852	154	ಜ	344	63
Anti sen se	pair ver.	+ CTRL	CTRL	+ CTRL	VER.	VER.	VER.			VER.	SE.
Probe pass	SP SP SP SP SP SP SP SP SP SP SP SP SP S	+	+	+	+	+	+	+		+	•
Probe Probe sen		Actin IuM	GAPDH 30um	HUMM HBA123	Known 10AC	Known 10C	Known 9AC	260AC	260C	261AC	72C

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		<del></del>						_	-	_	
Brain	11	1.16	0.86	99.0	1.43	-	1.2	4.89	-	1	-
H1299	43	0.9	2.16	1.65	1.48	1.55	1.29	1.04	-1	<del>-</del>	-
PANC-1 H1299	37	98.0	0.62	1.13	1.76	1.65	1.52	1	-1	-1	-
	28	1.13		0.83	0.59	-	1.1	1.09	1	1	-
MCF7	85	1.32	0.78	1.31	0.96		1.48		1	1.86	1
63	67b 85	0.55	0.81	1.32	1.16	1.3	1.09	0.84 1.55 1.1	1.68	0.94 1.86	-
HepG2	998 998	0.34 0.55 1.32 1.13	0.85	1.37	0.940.84 1.12 1.16 0.96 0.59	0.85 1.3 1	1.03 1.09 1.48 1.11	0.84	1	1.5	-
cat	99		0.91	0.62	0.84	-		1		1	-1 1.83
Jurkat	88	1.33	1.36	1.13	0.94	_	1.34	-	-	0.58 1.95	7-
31	99	1.36	1.19	0.71	<b>~</b>	-	0.79	0.5	<b> </b> -	0.58	1
G-361	8	1.41 1.36 1.33 1	0.82 0.37 0.31 0.36 0.28 0.55 0.44 0.93 0.69 0.96 0.57 1.4 1.19 1.36 0.91 0.85 0.81 0.78 0.5	1.12 0.82 0.97 0.55 0.95 0.71 1.13 0.62 1.37 1.32 1.31 0.83 1.13	0.78 1.74 1.22 1.87 1.34 1.42 1.13 1.17 0.95 0.77 0.35 1.42 1	-	0.86 0.52 1.38 0.79 1.34 1.1	0.84 0.5	-	-	1
	51	1.52 0.94	0.57	0.55	0.35	0.57	0.52	0.72	-1	0.52	0.99
<b>T24</b>	69	1.52	96.0	0.97	0.77	1	0.86	0.56	,	96.0	1
45	83		0.69	0.82	0.95	_	6.0	_	-	0.72	<b>-</b>
DU 145	82	1.19 1.1	0.93	1.12	1.17	-	1.05	1.02	-	0.83 1.36 0.72 0.96	1.02
enta	92	-	0.44		1.13	-	0.67	3.07	246	0.83	-
Placenta	72b	1.51	0.55	1.19	1.42	1	104	1.52	_	1.39	_
s	75	0.98 1.34 1.37 0.45 0.55	0.28	1.16 0.71 1.19 0.9	1.34	1	0.842.11 1.27 1.54 1.16 1.04 0.67 1.05 0.9	3.45	-	1.31	7
Testis	71	0.45	0.36	1.16	1.87	0.89	1.54	3.64 1.01 2.58 1.43 3.45	-	2.17	-
<u>6</u>		1.37	0.31		1.22		1.27	2.58	-	-	_
Lung	70 74	1.34	0.37	1.04 1.44 0.9	1.74	1.61 1.59 1	2.11	101		,	-
	989	0.98	0.82	1.04	0.78	1.61	0.84	3.64	-		1.051

Fig. 23 (Cont.)

# 50/53

# FIG. 24a

2091_0	Z19505_0	5019	M78914_25	801	OL: 187	
Query:	222 accccctgccg	tagccatct	tgcctctctgctga	gcggaagccc	ccgttcggctcctgt	281
	111111111111	nimini	11111111111111	нинни		
Sbict:	160 acccctgccg					
<b>,</b>						
Ouerv:	282 tgttagcggcc	tctctaggc	taccactgacaccg	tetetataae	ccggagcctaagaga	341
~						
Shict.	100 tgttagcggcc					
bbjec.	100 09000909900	ccccagge		2000030330		-
Oneru.	342 cggaagttcgt	otttccadd.	cac 364			
Query.						
مدمد الدمات	,					
SDJCE:	40 cggaagttcgt	guudeayy	cgc 18			
	05 5 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	\	1.0 1.0			
	= 87.7 bits (44		= 16-18			
	ities = $44/44$ (1					
Stran	d = Plus / Minus					
					225	
Query:	183 acctgctagta				226	
Sbjct:	229 acctgctagta	.ggacgcaga	aagacagaaggcga	aggagacccc	186	

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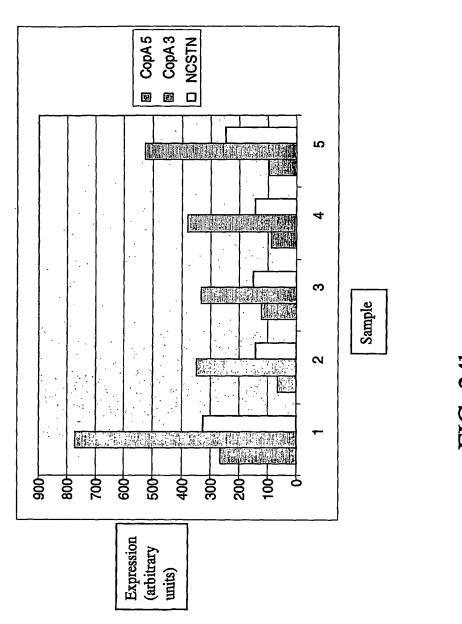


FIG. 24t

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# FIG. 25a

3673_0	T247	746_0 3	068	N31850_0	1	1705	OL:	585	
Query:	2480	tgagttatgttgt							
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Query:	2540	tgcaatgtcacca							
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Query:	2600	ctaggatnnnnnr						gagctggcga 	
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Query:	2660	gtgggtgggaaat							
Sbjct:	1525	gtgggtgggaaat	gaaatg	tttattgag	gatetget	ttgtgct	.gggca	ıctttaatcca	ca 1466
Query:	2720	ttttatcgtttac							
Sbjct:	1465	ttttatcgtttac	ettttca	aacagatgo	caccttacc	CCCCCCC	caatg	getetgteeet	gc 1406
Query:	2780	agatatcagaaga							
Sbjct:	1405	agatatcagaaga	cagtgt	gattttcat	gctctgaa	igttcagt	tttac	catccaagcat	cc 1346
Query:	2840	ctctctgttttt							
Sbjct:	1345	ctctctgttttt	aacaat	ccaaagaca	iggccaaaa	aaagcac	cacaç	gtttattaagt	ac 1286
Query:	2900	ttactaagcacco							
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Sbjct:	1225	tggggcacaatat							
Query:	3020	agttgaaatactg						064	
Sbjct:	1165	agttgaaatactg	gacatta	attaaata	gagttgta	ataaatac	aa 11	121	

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## Fig.25b

>45499 T24746\_1 (45497 T24746\_P2) #GENE\_SYMBOL IL24 ;MDA7 ;ST16 #GO\_F #GO\_ACC 5125 #GO\_Desc cytokine activity #CL 1 #DB sp #EN IL24\_HUMAN #GO\_P #GO\_ACC 6915 #GO\_Desc apoptosis #CL 1 #DB sp #EN IL24\_HUMAN #GO\_P #GO\_ACC 6955 #GO\_Desc immune response #CL 1 #DB sp #EN IL24\_HUMAN #GO\_C #GO\_ACC 5576 #GO\_Desc extracellular #CL 3 #DB PROLOC #EN PROLOC #GO\_C #GO\_ACC 5576 #GO\_Desc extracellular #CL 1 #DB sp #EN IL24\_HUMAN >45290 W01276\_0 (45289 W01276\_P1) #GENE\_SYMBOL TOSO #TAA blood-tumor #GO\_F #GO\_ACC 8189 #GO\_Desc apoptosis inhibitor activity #CL 1 #DB sp #EN O60667 #GO\_P #GO\_ACC 6916 #GO\_Desc anti-apoptosis #CL 1 #DB sp #EN O60667 #GO\_P #GO\_ACC 6968 #GO\_Desc cellular defense response #CL 1 #DB sp #EN O60667 #GO\_P #GO\_ACC 6968 #GO\_Desc membrane #CL 3 #DB PROLOC #EN PROLOC

1

## SEQUENCE LISTING

<110> Levanon Erez, et al.

<120> METHODS AND SYSTEMS FOR IDENTIFYING NATURALLY OCCURRING ANTISENSE TRANSCRIPTS AND METHODS AND KITS UTILIZING SAME

<130> 27987

<150> US 09/718,407

<151> 2000-11-24

<150> US 09/732,938

<151> 2000-12-11

<150> US 09/785,439

<151> 2001-02-20

<150> US 09/907,923

<151> 2001-07-18

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<151> 2001-11-06

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<151> 2002-7-24

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2

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tttcagattg	cagtacagct	atgtaactga	gtaagacagg	gagaaatatt	aatccgtgag	720
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3

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<212> DNA

<213> Homo sapiens

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<213> Homo sapiens

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<211> 1934

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<212> DNA

WO 2004/104161

<213> Homo sapiens

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<213> Homo sapiens

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WO 2004/104161

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37

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48

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